

**FOR OFFICE USE ONLY**

P Z File # \_\_\_\_\_

Application Fee: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Acceptance Date: \_\_\_\_\_

Review Date: SRDT \_\_\_\_\_ P &amp; Z \_\_\_\_\_ CC \_\_\_\_\_

## Comprehensive Plan Amendment Application

**A. PROJECT**

1. Project Name: Cooks Lane
2. Address of Subject Property: Cooks Lane
3. Parcel ID Number(s): 016562-000-00
4. Existing Use of Property: Vacant
5. Future Land Use Map Designation: Mixed Use
6. Existing Zoning Designation: R-3
7. Proposed Future Land Use Map Designation: IND-Industrial
8. Acreage: 5.08

**B. APPLICANT**

1. Applicant's Status ☐ Owner (title holder) ☒ Agent
2. Name of Applicant(s) or Contact Person(s): Janis K. Fleet Title: President  
Company (if applicable): Fleet & Associates Architects/Planners, Inc  
Mailing address: 11557 Hidden Harbor Way  
City: Jacksonville State: Florida ZIP: 32223  
Telephone: 904 476-3220 FAX: ( ) e-mail: jfleet@fleetarchitectsplanners.net
3. If the applicant is agent for the property owner\*  
Name of Owner (title holder): A2W GCS LLC  
Mailing address: 91 Branscomb Road  
City: Green Cove Springs State: Florida ZIP: 32043  
Telephone: 904 334-5517 FAX: ( ) e-mail: joe@wigginsgroup.net

\* Must provide executed Property Owner Affidavit authorizing the agent to act on behalf of the property owner.

**C. ADDITIONAL INFORMATION**

1. Is there any additional contact for sale of, or options to purchase, the subject property?  
☐ Yes ☒ No If yes, list names of all parties involved:  
If yes, is the contract/option contingent or absolute?  
☐ Contingent ☐ Absolute

**D. ATTACHMENTS (One copy reduced to no greater than 11 x 17, plus one copy in PDF format.)**

1. Statement of proposed change, including a map showing the proposed Future Land Use Map change and Future Land Use Map designations on surrounding properties
2. Concurrency Impact Analysis which considers the impact on public facilities, including potable water, sanitary sewer, transportation, solid waste, recreation, stormwater, and public schools.
3. Needs Analysis which demonstrates the necessity of the proposed change. This analysis may consist, in whole or part, of a market impact study or real estate needs analysis.
4. Analysis of Consistency with the City of Green Cove Springs Comprehensive Plan (analysis must identify specific Goals, Objectives, and Policies and describe in detail how the application complies with the noted Goal, Objective, or Policy.)
5. A current aerial map (Maybe obtained from the Clay County Property Appraiser.)
6. Legal description with tax parcel number.
7. Boundary survey
8. Vicinity Map
9. Warranty Deed or the other proof of ownership
10. Fee.
  - a. Future Land Use Map Amendments - \$1,500 plus \$20 per acre
  - ☒ b. Text Amendment to Comprehensive Plan - \$1,500 per element
  - c. All applications are subject 10% administrative fee and must pay the cost of postage, signs, advertisements, and the fee for any outside consultants.

No application shall be accepted for processing until the required application fee is paid in full by the applicant. Any fees necessary for technical review or additional reviews of the application by a consultant will be billed to the applicant at the rate of the reviewing entity. The invoice shall be paid in full prior to any action of any kind on the development application.

**All 10 attachments are required for a complete application. A completeness review of the application will be conducted within five (5) business days of receipt. If the application is determined to be incomplete, the application will be returned to the applicant.**

**I/We certify and acknowledge that the information contained herein is true and correct to the best of my/our knowledge:**

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

Date

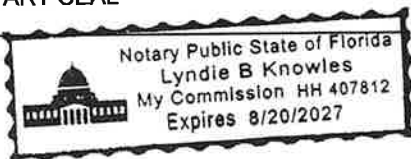
Date

State of Florida County of Clay

The foregoing application is acknowledged before me this 12 day of May, 2025, by Janis K. Heel

Fluor, who is/are personally known to me, or who has/have produced \_\_\_\_\_ as identification.

NOTARY SEAL



Signature of Notary Public, State of Florida