



**FOR OFFICE USE ONLY**

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

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

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

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

# PUD Rezoning Application

**A. PROJECT**

- 1. Project Name: Vermont Ave Development
- 2. Address of Subject Property: 200 Vermont Ave N, Green Cove Springs, FL 32043
- 3. Parcel ID Number(s): 38-06-26-018416-000-00 Alt Id - 018416-000-00
- 4. Existing Use of Property: Single Family (0100)
- 5. Future Land Use Map Designation : R2
- 6. Existing Zoning Designation: R2
- 7. Proposed Zoning Designation: PUD / R2
- 8. Acreage: 4.16

**B. APPLICANT**

- 1. Applicant's Status  Owner (title holder)  Agent
- 2. Name of Applicant(s) or Contact Person(s): Vince Pessolano Title: MgMbr  
 Company (if applicable): TheoGrace Holdings LLC  
 Mailing address: 3545 St Johns Bluff Rd S, STE 225  
 City: Jacksonville State: FL ZIP: 32224  
 Telephone: 904 528-2200 FAX: ( ) \_\_\_\_\_ e-mail: TheoGraceHoldings@gmail.com

- 3. If the applicant is agent for the property owner\*  
 Name of Owner (titleholder): DAVID L. HERBERT, JOINED BY HIS WIFE, CYNTHIA RBERT, hereinafter called the "Grantor" to DAVID L. HERBERT AND CYNTHIA ANN HERBERT, TRUSTEES OF THE DAVID L. HERBERT AND CYNTHIA ANN HERBERT REVOCABLE LIVING TRUST U/T/A 680 Bayard Road, Florida 32043  
 Mailing address: 680 Bayard Road, Florida 32043  
 City: Green Cove Springs State: Florida ZIP: 32043  
 Telephone: 904 528-2200 FAX: ( ) \_\_\_\_\_ e-mail: \_\_\_\_\_

\* 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**

1. Statement of proposed change, including a map showing the proposed zoning change and zoning designations on surrounding properties
2. A current aerial map (Maybe obtained from the Clay County Property Appraiser.)
3. Plat of the property (Maybe obtained from the Clay County Property Appraiser.)
4. Legal description with tax parcel number.
5. Boundary survey
6. Warranty Deed or the other proof of ownership
7. Site Plan
8. Written Description
9. Binding Letter
10. Fee.

a. \$2,000 plus \$20 per acre

b. 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

Typed or printed name and title of applicant

Date

State of

Signature of Co-applicant

Typed or printed name of co-applicant

Date

County of

The foregoing application is acknowledged before me this 7<sup>th</sup> day of October, 2024 by Vincent

Pessolano, who is/are personally known to me, or who has/have produced FLORIDA DL as identification.

NOTARY SEAL

Signature of Notary Public, State of FLORIDA

K. J. Patel

