



FOR OFFICE USE ONLY

P Z File # _____

Application Fee: _____

Filing Date: _____ Acceptance Date: _____

Review Date: SRDT _____ P & Z _____ CC _____

Rezoning Application

A. PROJECT

- Project Name: HLM INDUSTRIAL REZONING
- Address of Subject Property: LEONARD C TAYLOR PARKWAY
- Parcel ID Number(s): (A PORTION OF) 38-06-26-016451-003-00
- Existing Use of Property: INDUSTRIAL MANUFACTURING ~~INDUSTRIAL LAND USE~~ MIXED USE
- Future Land Use Map Designation: INDUSTRIAL LAND USE ~~INDUSTRIAL LAND USE~~ MIXED USE
- Existing Zoning Designation: CH2 COMMERCIAL HIGH INTENSITY ~~CH2 COMMERCIAL HIGH INTENSITY~~ C2 GENERAL COMMERCIAL
- Proposed Zoning Designation: INDUSTRIAL (IND) ~~INDUSTRIAL (IND)~~ M2 HEAVY INDUSTRIAL
- Acreage: 31 +/- + 11 +/- = 43.21 ACRES

B. APPLICANT

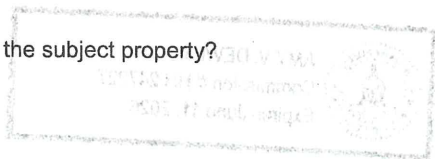
- Applicant's Status: Owner (title holder) Agent
- Name of Applicant(s) or Contact Person(s): WARD HUNTLEY Title: OWNER
 Company (if applicable): HLM INDUSTRIAL INVESTMENTS
 Mailing address: 1890 KINGSLEY AVENUE, STE. 102
 City: ORANGE PARK State: FL ZIP: 32073
 Telephone: 904 272-0435 FAX: 904 272-4488 e-mail: A.VAUGHN@MMSEJAX.COM

- If the applicant is agent for the property owner*
 Name of Owner (titleholder): _____
 Mailing address: _____
 City: _____ State: _____ ZIP: _____
 Telephone: () _____ FAX: () _____ e-mail: _____

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

C. ADDITIONAL INFORMATION

- 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



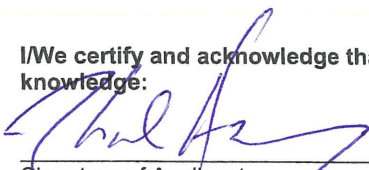
D. ATTACHMENTS

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. Fee.
 - a. \$750 plus \$20 per acre over 5
 - 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 7 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

Ward Huntley

Typed or printed name and title of applicant

6-5-23

Date

State of FL

Signature of Co-applicant

Typed or printed name of co-applicant

Date

County of CLAY

The foregoing application is acknowledged before me this 5th day of JUNE, 2023 by L WARD

HUNTLEY, who is/are personally known to me, or who has/have produced _____ as identification.

NOTARY SEAL



Signature of Notary Public, State of FL

