

FOR OFFICE USE ONLY	
P Z File #	
Application Fee:	
Filing Date:Acceptance Date:_	
Review Date: SRDTP & ZCC	

	Review Date. SRD1F & ZCC			
Со	mprehensive Plan Amendment Application May & Teast			
A. PRO				
1.	Project Name: Huntley Commerce Center-or 17-16 Commerce Center			
2.	Address of Subject Property: Leonard C taylor Parway			
3.	Parcel ID Number(s): 38-06-26-016451-000-00 and 016451-003-00			
4.	Existing Use of Property: Commercial Industrial			
5.	Future Land Use Map Designation : Commercial			
6.	Existing Zoning Designation; C-2			
7.	Industrial			
8.	Acreage: 58 acre			
R APP	LICANT			
1.	Applicant's Status wner (title holder)			
2.	Name of Applicant(s) or Contact Person(s): Kelly Hartwig			
	Company (if applicable): Cypress Management and Design			
	Mailing address: PO Box 8880,			
	City: Fleming Island State: Florida ZIP: 32006			
	Telephone: 904-759-9576 FAX: () e-mail: Siteopt@bellsouth.net			
3.	If the applicant is agent for the property owner* Name of Owner (title holder): HLM Investments			
Mailing address: 1890 Kingsley ave.				
	City: Orange Park State: Florida ZIP: 32073			
	Telephone: ()			
* Mu	ist provide executed Property Owner Affidavit authorizing the agent to act on behalf of the property owner.			
C. ADD	ITIONAL 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 ves, is the contract/option contingent or absolute? Contingent Absolute			

City of Green Cove Springs Development Services Department ♦321 Walnut Street♦ Green Cove Springs, FL 32043♦(904) 297-7500

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

- Statement of proposed change, including a map showing the proposed Future Land Use Map change and Future Land Use Map designations on surrounding properties
- 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
- 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.

INVe certificand acknowledge that the inform	ation contained herein is true and correct to the best of my/our		
knowledge:	ation contained herein is true and correct to the best of myrodi		
Jag /			
Signature of Applicant	Signature of Co-applicant		
Kelly Hartwig			
Typed or printed name and title of applicant	Typed or printed name of co-applicant		
2/1/2024			
Date	Date		
State of Florida County of Class			
The foregoing application is acknowledged before me this day of February , 2024 by Kelly			
Hattig , who is/are personally known to me, or who has/have produced			
as identification.			
NOTARY SEAL			
NO MICH DEAL	da M		
Notary Public State of Florida			
Lyndie B Knowles My Commission HH 407812	Signature of Notary Public, State of Flords		
Expires 8/20/2027			

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