



**GROWTH MANAGEMENT**  
205 North Marion Ave  
Lake City, Florida 32055  
Telephone (386) 719-5750  
growthmanagement@lcfla.com

**FOR PLANNING USE ONLY**

Application # \_\_\_\_\_

Application Fee \$ \_\_\_\_\_

Receipt No. \_\_\_\_\_

Filing Date \_\_\_\_\_

Completeness Date \_\_\_\_\_

# Minor/Major Subdivision – Preliminary/Final Plat

**Minor Subdivision (Four (4) or less lots) \$400.00**

**Major Subdivision (Five (5) or more lots) \$750.00**

## A. PROJECT INFORMATION

1. Project Name: Hickory Hills Extension
2. Address of Subject Property: Butler Glen
3. Parcel ID Number(s): 08-4S-17-08166-000
4. Future Land Use Map Designation: RSF-1
5. Zoning Designation: RSF-1
6. Acreage: 17.9
7. Existing Use of Property: Vacant
8. Proposed use of Property: Residential
9. Type of Development (Check All That Apply):  
 Increase of floor area to an existing structure: Total increase of square footage \_\_\_\_\_  
 New construction: Total square footage \_\_\_\_\_  
 Relocation of an existing structure: Total square footage \_\_\_\_\_

## B. APPLICANT INFORMATION

1. Applicant Status  Owner (title holder)  Agent
2. Name of Applicant(s): Megan Carter Title: Planner  
Company name (if applicable): North Florida Professional Services, Inc.  
Mailing Address: P.O. Box 3823  
City: Lake City State: FL Zip: 32056  
Telephone: (386) 752-4675 Fax: (386) 752-4674 Email: mcarter@nfps.net

**PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.**

3. If the applicant is agent for the property owner\*.  
Property Owner Name (title holder): Martha Carter  
Mailing Address: 1736 SW Paloma Ct  
City: Lake City State: FL Zip: 32025  
Telephone: (386) 288-2070 Fax: ( ) Email: mjo521@comcast.net

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

## C. ADDITIONAL INFORMATION

1. Is there any additional contract for the sale of, or options to purchase, the subject property?

If yes, list the names of all parties involved: N/A

If yes, is the contract/option contingent or absolute:  Contingent  Absolute

2. Has a previous application been made on all or part of the subject property?

Future Land Use Map Amendment:  Yes \_\_\_\_\_  No \_\_\_\_\_

Future Land Use Map Amendment Application No. CPA \_\_\_\_\_

Site Specific Amendment to the Official Zoning Atlas (Rezoning):  Yes \_\_\_\_\_  No \_\_\_\_\_

Site Specific Amendment to the Official Zoning Atlas (Rezoning) Application No. \_\_\_\_\_

Variance:  Yes \_\_\_\_\_  No \_\_\_\_\_

Variance Application No. V \_\_\_\_\_

Special Exception:  Yes \_\_\_\_\_  No \_\_\_\_\_

Special Exception Application No. SE \_\_\_\_\_

## D. ATTACHMENT/SUBMITTAL REQUIREMENTS

1. Vicinity Map – Indicating general location of the site, abutting streets, existing utilities, complete legal description of the property in question, and adjacent land use.

2. Site Plan – Including, but not limited to the following:

- a. Name, location, owner, and designer of the proposed development.
- b. Present zoning for subject site.
- c. Location of the site in relation to surrounding properties, including the means of ingress and egress to such properties and any screening or buffers on such properties.
- d. Date, north arrow, and graphic scale not less than one inch equal to 50 feet.
- e. Area and dimensions of site (Survey).
- f. Location of all property lines, existing right-of-way approaches, sidewalks, curbs, and gutters.
- g. Access to utilities and points of utility hook-up.
- h. Location and dimensions of all existing and proposed parking areas and loading areas.
- i. Location, size, and design of proposed landscaped areas (including existing trees and required landscaped buffer areas).
- j. Location and size of any lakes, ponds, canals, or other waters and waterways.
- k. Structures and major features fully dimensioned including setbacks, distances between structures, floor area, width of driveways, parking spaces, property or lot lines, and percent of property covered by structures.
- l. Location of trash receptacles.
- m. For multiple-family, hotel, motel, and mobile home park site plans:
  - i. Tabulation of gross acreage.
  - ii. Tabulation of density.
  - iii. Number of dwelling units proposed.
  - iv. Location and percent of total open space and recreation areas.
  - v. Percent of lot covered by buildings.



application shall be accepted or processed until the required application fee has been paid.

12. A Minor Subdivision is not required to be heard by the Planning and Zoning Board. A Minor Subdivision is only required to have City Council approval.

#### NOTICE TO APPLICANT

All eleven (11) attachments are required for a complete application. Once an application is submitted and paid for, a completeness review will be done to ensure all the requirements for a complete application have been met. If there are any deficiencies, the applicant will be notified in writing.

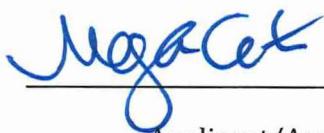
A total of Eighteen (18) copies of proposed site plan application and all support materials must be submitted along with a PDF copy or on a CD. See City of Lake City submittal guidelines for additional submittal requirements.

**THE APPLICANT ACKNOWLEDGES THAT THE APPLICANT OR AGENT MUST BE PRESENT AT THE PUBLIC HEARING BEFORE THE PLANNING AND ZONING BOARD FOR MAJOR SUBDIVISIONS ONLY, AS ADOPTED IN THE BOARD RULES AND PROCEDURES, OTHERWISE THE REQUEST MAY BE CONTINUED TO A FUTURE HEARING DATE.**

I hereby certify that all of the above statements and statements contained in any documents or plans submitted herewith are true and accurate to the best of my knowledge and belief.

Megan Carter

Applicant/Agent Name (Type or Print)



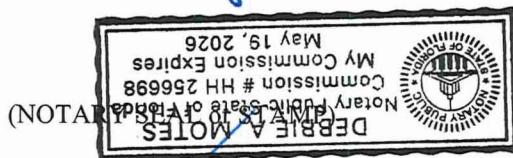
Applicant/Agent Signature



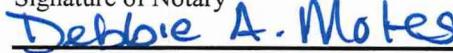
Date

STATE OF FLORIDA  
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 25<sup>th</sup> day of July, 2022 by (name of person acknowledging). Megan Carter



Signature of Notary



Printed Name of Notary

Personally Known  OR Produced Identification \_\_\_\_\_  
Type of Identification Produced

## APPLICATION AGENT AUTHORIZATION FORM

TO: City of Lake City  
205 N Marion Ave  
Lake City, FL 32055

### Authority to Act as Agent

On my/our behalf, I appoint Megan Carter  
(Name of Person to Act as my Agent)

for North Florida Professional Services, Inc.  
(Company Name for the Agent, if applicable)

to act as my/our agent in the preparation and submittal of this application

for Minor Subdivision  
(Type of Application)

I acknowledge that all responsibility for complying with the terms and conditions for approval of this application, still resides with me as the Applicant/Owner.

Applicant/Owner's Name: Martha Carter

Applicant/Owner's Title: Owner

On Behalf of: \_\_\_\_\_  
(Company Name, if applicable)

Telephone: 386-288-2070 Date: \_\_\_\_\_

Applicant/Owner's Signature: Martha Jane Odom Carter

Print Name: Martha Jane Odom Carter

STATE OF FLORIDA  
COUNTY OF Columbia

The Foregoing instrument was acknowledged before me this 25<sup>th</sup> day of  
July, 2022, by Martha Jane Odom Carter,  
whom is personally known by me  OR produced identification   
Type of Identification Produced \_\_\_\_\_

Debbie A. Motes  
(Notary Signature) (SEAL)

