



GROWTH MANAGEMENT
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FOR PLANNING USE ONLY
 Application # Z _____
 Application Fee \$ _____
 Receipt No. _____
 Filing Date _____
 Completeness Date _____

Less Than or Equal to 10 Acres: \$750.00 Greater Than 10 Acres: \$1,000.00 or actual cost

Site Specific Amendment to the Official Zoning Atlas (Rezoning) Application

A. PROJECT INFORMATION

1. Project Name: _____
2. Address of Subject Property: _____
3. Parcel ID Number(s): _____
4. Future Land Use Map Designation: _____
5. Existing Zoning Designation: _____
6. Proposed Zoning Designation: _____
7. Acreage: _____
8. Existing Use of Property: _____
9. Proposed use of Property: _____

B. APPLICANT INFORMATION

1. Applicant Status Owner (title holder) Agent
2. Name of Applicant(s): _____ Title: _____
 Company name (if applicable): _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: (____) _____ Fax: (____) _____ Email: _____

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): _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: (____) _____ Fax: (____) _____ Email: _____

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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: _____
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: Yes No
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. _____
Special Exception: Yes _____ No _____
Special Exception Application No. _____

D. ATTACHMENT/SUBMITTAL REQUIREMENTS

1. Boundary Sketch or Survey with bearings and dimensions.
2. Aerial Photo (can be obtained via the Columbia County Property Appraiser’s Office).
3. Concurrency Impact Analysis: Concurrency Impact Analysis of impacts to public facilities, including but not limited to Transportation, Potable Water, Sanitary Sewer, and Solid Waste impacts. For residential Zoning Designations, an analysis of the impacts to Public Schools is required.
4. An Analysis of the Requirements of Article 12 of the Land Development Regulations:
 - a. Whether the proposed change would be in conformance with the county's comprehensive plan and would have an adverse effect on the county's comprehensive plan.
 - b. The existing land use pattern.
 - c. Possible creation of an isolated district unrelated to adjacent and nearby districts.
 - d. The population density pattern and possible increase or overtaxing of the load on public facilities such as schools, utilities, streets, etc.
 - e. Whether existing district boundaries are illogically drawn in relation to existing conditions on the property proposed for change.
 - f. Whether changed or changing conditions make the passage of the proposed amendment necessary.
 - g. Whether the proposed change will adversely influence living conditions in the neighborhood.
 - h. Whether the proposed change will create or excessively increase traffic congestion or otherwise affect public safety.
 - i. Whether the proposed change will create a drainage problem.
 - j. Whether the proposed change will seriously reduce light and air to adjacent areas.

- k. Whether the proposed change will adversely affect property values in the adjacent area.
 - l. Whether the proposed change will be a deterrent to the improvement or development of adjacent property in accord with existing regulations.
 - m. Whether the proposed change will constitute a grant of special privilege to an individual owner as contrasted with the public welfare.
 - n. Whether there are substantial reasons why the property cannot be used in accord with existing zoning.
 - o. Whether the change suggested is out of scale with the needs of the neighborhood or the City.

 - p. Whether it is impossible to find other adequate sites in the city for the proposed use in districts already permitting such use. When pertaining to other proposed amendments of these land development regulations. The planning and zoning board shall consider and study:
 - i. The need and justification for the change.
 - ii. The relationship of the proposed amendment to the purposes and objectives of the comprehensive planning program and to the City's comprehensive plan, with appropriate consideration as to whether the proposed change will further the purposes of these land development regulations and other ordinances, regulations, and actions designed to implement the City's comprehensive plan.
5. Legal Description with Tax Parcel Number (In Microsoft Word Format).
 6. Proof of Ownership (i.e. deed).
 7. Agent Authorization Form (signed and notarized).
 8. Proof of Payment of Taxes (can be obtained online via the Columbia County Tax Collector's Office).
 9. Fee. The application fee for a Site Specific Amendment to the Official Zoning Atlas is As listed in fee schedule. No application shall be accepted or processed until the required application fee has been paid.

NOTICE TO APPLICANT

All nine (9) 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. If an application is deemed to be incomplete, it may cause a delay in the scheduling of the application before the Planning & Zoning Board.

A total of eighteen (18) copies of proposed Site Specific Amendment to the Official Zoning Atlas Application and support material, and a PDF copy on a CD, are required at the time of submittal.

THE APPLICANT ACKNOWLEDGES THAT THE APPLICANT OR AGENT MUST BE PRESENT AT THE PUBLIC HEARING BEFORE THE PLANNING AND ZONING BOARD, 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.

Applicant/Agent Name (Type or Print)

Applicant/Agent Signature

Date

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by (name of person acknowledging).

(NOTARY SEAL or STAMP)

Signature of Notary

Printed Name of Notary

Personally Known _____ OR Produced Identification _____
Type of Identification Produced