

HOUSING AND NEIGHBORHOODS DEPARTMENT

NEIGHBORHOOD SERVICES DIVISION



**NEIGHBORHOOD ASSOCIATION**  
**REGISTRATION FOR ZONING NOTIFICATIONS**

To: Kenny Logsdon, AICP (Logsdon@COJ.net)  
Human Services Planner Senior  
Housing and Neighborhoods Department  
214 N. Hogan St., Suite 834  
Jacksonville, FL 32202

From: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

Date: \_\_\_\_\_

Name of Neighborhood Organization: \_\_\_\_\_

Person authorized to receive notifications: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Real Estate # \_\_\_\_\_  
(Tax Parcel ID#)

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Street boundaries of neighborhood: (North) \_\_\_\_\_  
(South) \_\_\_\_\_  
(East) \_\_\_\_\_  
(West) \_\_\_\_\_