Date Submitted:	Application Number:	
Date Filed:	Public Hearing:	

# **Application for Zoning Exception**

City of Jacksonville, Florida Planning and Development Department

Please type or print in ink. Instructions regarding the completion and submittal of this application are located at the end of this form. For additional information, please contact the Planning and Development Department at (904) 255-7865.

	For Officia	i Use Only		
Current Zoning District:		Current Land Use Category:		
Exception Sought:		Applicable Section of Ordinance Code:		
Council District:		Planning District:		
Previous Zoning Applications Filed (p	orovide applicati	on numbers):		
Notice of Violation(s):				
Number of Signs to Post:	Amount of Fee	:	Zoning Asst. Initials:	
Neighborhood Associations:				
Overlay:				
PROPERTY INFORMATION				
1. Complete Property Address:		2. Real Estate Number:		
3. Land Area (Acres):		4. Date Lot was Recorded:		
5. Property Located Between Streets:		6. Utility Services	s Provider:	
		City Water / City Sewer		
		Well / Septic		
7. Current Property Use:				
8. Exception Sought:				
9. In whose name will the Exception be granted:				
	Page	1 of 5		

OWNER	'S INFORMATION (please attach se	parate sheet if more than one owner)
10. Nam	e:	11. E-mail:
12. Addr	ess (including city, state, zip):	13. Preferred Telephone:
APPLICA	ANT'S INFORMATION (if different fro	om owner)
14. Nam	e:	15. E-mail:
16. Addr	ess (including city, state, zip):	17. Preferred Telephone:
CRITERI	A	
generally area, loc	y or without restriction throughout the	exception as "a use that would not be appropriate zoning district but which, if controlled as to the number, could promote the public health, safety, welfare, morals, perity or general welfare."
Exceptio evidence	ns, the Planning Commission may grant e of record presented at the public hear	nat, with respect to action upon Applications for Zoning the exception if it finds from a preponderance of the ing that the proposed use meets, to the extent
applicabl (i)	le, the following standards and criteria:  Will be consistent with the Compreh	ensive Plan, including any subsequent plan adopted by
( )	the Council pursuant thereto;	, <b>.</b> ,
(ii)		contiguous uses or zoning and compatible with the lering population, density, design, scale, and orientation ty values and existing similar uses;
(iii)		act inconsistent with the health, safety and welfare of
(iv)	Will not have a detrimental effect or	n vehicular or pedestrian traffic or parking conditions, or creation of traffic inconsistent with health, safety and
(v)	Will not have a detrimental effect or	n the future development of contiguous properties or the prehensive Plan, including any subsequent plan adopted
(vi)	Will not result in the creation of obje	ectionable or excessive noise, lights, vibrations, fumes, ing into account existing uses or zoning in the vicinity;

Will be sufficiently accessible to permit entry onto the property by fire, police, rescue and Page 2 of 5

Will not overburden existing public services and facilities;

last update: 1/12/2017

(vii)

(viii)

other services; and
(ix) Will be consistent with the definition of an exception, the standards and criteria of the zoning classification in which such use is proposed to be located and all other requirements for such particular use set for elsewhere in the Zoning Code (Chapter 656, Ordinance Code) or as otherwise adopted by the Planning Commission.

will be reviewed against, please describe the reason that the request is being sought. Provide as much information as you can; you may attach a separate sheet if necessary. Please note that failure by the applicant to adequately substantiate the need for the exception and to meet the criteria set forth may result in a denial.

ATTACHMENTS	ATTACHMENTS				
The following attachments must accomp	pany each copy of the applica	ation.			
Survey					
Site Plan – two (2) copies on 8 ½ x	11 and two (2) copies on 11	x 17 or larger			
Property Ownership Affidavit (Exhi	bit A)				
Agent Authorization if application i	is made by any person other	than the property owner (Exhibit B)			
Legal Description – may be written	as either lot and block, or m	etes and bounds (Exhibit 1)			
Proof of property ownership – may be print-out of property appraiser record card if individual owner, <a href="http://apps.coj.net/pao_propertySearch/Basic/Search.aspx">http://apps.coj.net/pao_propertySearch/Basic/Search.aspx</a> , or print-out of entry from the Florida Department of State Division of Corporations if a corporate owner, <a href="http://search.sunbiz.org/Inquiry/CorporationSearch/ByName">http://search.sunbiz.org/Inquiry/CorporationSearch/ByName</a> .  Letter from the Department of Children and Family Services (DCFS) – day care uses only  Advisory opinion letter from the Environmental Quality Division (EQD) – if required					
*Applications filed to correct existing zoning violations are subject to a double fee.					
Base Fee	Public Notices	<u>Advertisement</u>			
Residential Districts: \$1,161.00 \$7.00 per Addressee Billed directly to owner/agent					
Non-residential Districts: \$1,173.00					

#### **AUTHORIZATION**

Please review your application. No application will be accepted until all of the requested information has been supplied and the required fee has been paid. The acceptance of an application as being complete does not guarantee its approval by the Planning Commission. The owner and/or authorized agent must be present at the public hearing.

The required public notice signs must be posted on the property within five (5) working days after the filing of this application. Sign(s) must remain posted and maintained until a final determination has been made on the application.

<u>I hereby certify that I have read and understand</u> the information contained in this application, that I am the owner or authorized agent for the owner with authority to make this application, and that all of the information contained in this application, including the attachments, is true and correct to the best of my knowledge.

Owner(s)	Applicant or Agent (if different than owner)
Print name:	Print name:
Signature:	Signature:
Owner(s) Print name: Signature:	*An agent authorization letter is required if the application is made by any person other than the property owner.

## **SUBMITTAL**

This application must be typed or printed in ink and submitted along with three (3) copies for a total of **four (4) applications**. Each application must include **all required attachments**.

### **Submit applications to:**

Planning and Development Department, Zoning Section 214 North Hogan Street, 2<sup>nd</sup> Floor Jacksonville, Florida 32202 (904) 255-8300

## SUBMITTAL

Any Application for Zoning Variance (V), Exception (E), Sign Waiver (SW), Waiver of Liquor Distance (WLD), Waiver of Required Minimum Road Frontage (WRF), or Administrative Deviation (AD) will be filed with the Planning and Development Department, at the Zoning Counter on the 2nd floor of the Edward Ball Building, located at 214 North Hogan Street, Jacksonville, Florida 32202, (904) 255-8300.

All applications must be complete when filed. Four (4) completed applications, which include all required attachments, must be submitted.

### **APPLICATION FORM INSTRUCTIONS**

The following is a step by step guide to help persons interested in applying for a **Zoning Exception**. Each item listed below corresponds to the item/question numbers on the application form.

The gray box titled, "For Official Use Only," will be completed by the Zoning Section Staff.

#### • PROPERTY INFORMATION BOX

#### Items 1-4

Enter the street address, the real estate number(s), the total acreage of the parcel(s), and the date that the lot was officially recorded as shown on the original deed for the parcel or legal description. Real estate numbers and parcel information can be obtained through the Property Appraiser's website: www.coj.net/departments/property-appraiser.aspx

#### Item 5

Please list the names of the two closest public streets to the property, not including the street on which the property is addressed. These streets are typically perpendicular to the street on which the property fronts.

### Item 6

Please indicate whether the utilities will be provided by JEA, private well and septic tank, or another provider.

#### Item 7

Please indicate how the property is currently being used.

### Item 8

Enter the request sought, such as what specific use you are trying to gain approval. If more than one request is needed, please list all that apply, and list each request separately.

PLANNING AND DEVELOPMENT DEPARTMENT

214 N. Hogan Street, Suite 300 | Jacksonville, FL 32202 | Phone: 904.255.7800 | Fax: 904.255.7884 | www.coj.net

#### Item 9

When any application is approved, the request is given a final order by the City. The request will be applicable to a person or entity, and this will be listed in the final order. If you are an individual and the request is for your personal property, you would list your name and that of your spouse, if applicable. If the request is for a business, this requires the name of the corporation or entity that will own the business. Pursuant to Section 656.136(c), a zoning exception shall be transferable and run with the land. When the use requires licensure or other approvals by the State or any other governmental entity, such as a liquor license approval or approval for day care facilities, the zoning exception granted in connection with such use shall be granted to the applicant or the State license holder.

### • OWNER'S INFORMATION BOX

#### Items 10-13

Please provide the full name, address, e-mail address, and preferred telephone number for the owner(s) of the property. Use a separate sheet of paper if necessary.

#### • APPLICANT'S INFORMATION BOX

#### Items 14-17

If the applicant is not the property owner, please provide the full name, address, e-mail address, and preferred telephone number for the applicant or authorized agent.

#### CRITERIA

#### Item 18

Please read the criteria against which the request will be reviewed, and use the area on the application or if needed, a separate piece of paper, to provide as much detail as possible to describe the reason for the application. This is your opportunity to provide as much information as you can to assist the planner assigned to your application in understanding your request. This is critical and may impact the Planning Department's recommendation. Be specific about what you're trying to do or accomplish.

### ATTACHMENTS

All applications must consist of four (4) complete sets of the application and <u>all required attachments</u>. All required attachments should be provided on 8  $\frac{1}{2}$  " x 11" paper, with the exception of two (2) of the four (4) application sets, which will include site plans at 11" x 17" or larger.

- Survey, signed and sealed by a licensed surveyor within the last five (5) years or as required by the Current Planning Division
- Legal description, may be written as either lot and block, or metes and bounds (Exhibit 1)
- > Site plan, drawn to scale
- Agent Authorization Letter is required if application is made by any person other than the property owner. (Exhibit B)
- Property Ownership Affidavit (Exhibit A)

## PLANNING AND DEVELOPMENT DEPARTMENT

214 N. Hogan Street, Suite 300 | Jacksonville, FL 32202 | Phone: 904.255.7800 | Fax: 904.255.7884 | www.coj.net

- Proof of property ownership, may be a print-out of property appraiser record card if individual owner (<a href="http://apps.coj.net/pao\_propertySearch/Basic/Search.aspx">http://apps.coj.net/pao\_propertySearch/Basic/Search.aspx</a>); or print-out of entry from the Florida Department of State Division of Corporations if a corporate owner (<a href="http://search.sunbiz.org/Inquiry/CorporationSearch/ByName">http://search.sunbiz.org/Inquiry/CorporationSearch/ByName</a>).
- Letter from the Florida Department of Children and Family Services (DCFS). **Applicable to day** care uses only.
- Advisory opinion letter from the City of Jacksonville Environmental Quality Division (EQD) if required.

A larger scale drawing may be required for commercially zoned property with an existing structure, or otherwise as required by the Planning and Development Department's Zoning Section. The same shall also show existing improvements on the property.

The following information must be shown on the **site plan**:

- Property dimensions and total land area
- Buildings (including dimensions and total lot coverage area)
- Parking spaces and dimensions (including handicap) commercial only
- Loading and unloading area, if applicable, with turn-around area and dimensions commercial only
- Landscape areas and dimensions commercial only
- Ingress and egress (driveways, alleys and easements)
- Adjacent streets and rights-of-way
- North arrow, map scale, and date of drawing
- Signage (if any)
- Building setbacks per Zoning Code
- > Adjacent zoning districts and property uses

All drawings must be drawn to scale. Failure to have a "to-scale" drawing with each of the items above shown could result in your application being deferred or denied by the Planning Commission.

### **NOTIFICATIONS**

- When your completed application is submitted and accepted as sufficient, a list of property owners (addressee) within a 350-feet radius of the property will be prepared by the Department. These property owners will be mailed a notice of public hearing.
- For all applications, <u>except</u> Administrative Deviations, the applicant will receive an invoice from the *Financial News & Daily Record* for the advertisement of their notice of public hearing. This invoice must be paid prior to the application being heard by the Planning Commission.

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> The applicant will be provided with signs to post on their property. The required signs must be posted on the property within five (5) working days after the application is filed. Sign(s) must be visible and maintained until a final determination has been made on the application.

PLANNING AND DEVELOPMENT DEPARTMENT

214 N. Hogan Street, Suite 300 | Jacksonville, FL 32202 | Phone: 904.255.7800 | Fax: 904.255.7884 | www.coj.net

# Legal Description Exhibit 1 June 30, 2021

# <u>Property Ownership Affidavit – Limited Liability Company (LLC)</u>

Date:	
City of Jacksonville	
Planning and Development Departmer	nt
214 North Hogan Street, Suite 300,	
Jacksonville, Florida 32202	
	ollowing site location in Jacksonville, Florida: RE#(s):
To Whom it May Concern:	
I , as	of
	under the laws of the state of, hereby certify
that said LLC is the Owner of the prope	erty described in Exhibit 1 in connection with filing application(s)
for sub	mitted to the Jacksonville Planning and Development
Department.	
(signature)	
(print name)	
shown through a printout from sunbiz.or	that signatory is an authorized representative of the LLC. This may be rg showing that the person is either a "sole member" or a "managing led through a resolution, power of attorney, etc.
STATE OF FLORIDA COUNTY OF DUVAL	
presence or [_] online notarization	d acknowledged before me by means of [_] physical , this day of, by, as, of
	, a corporation, who is personally
known to me or who has produced took an oath.	as identification and who
	(Signature of NOTARY PUBLIC)
	(Printed name of NOTARY PUBLIC)
	State of Florida at Large.
	My commission expires:

# **Property Ownership Affidavit - Corporation**

Date:	
City of Jacksonville	
Planning and Development Department	t
214 North Hogan Street, Suite 300,	
Jacksonville, Florida 32202	
Re: Property Owner Affidavit for the fo	llowing site location in Jacksonville, Florida:
	RE#(s):
To Whom it May Concern:	
1	, as of
	corporation, hereby certify that said
	ty described in Exhibit 1 in connection with filing application(s)
forsubmitted to the	e Jacksonville Planning and Development Department.
(signature)	
(print name)	
(r	
Please provide documentation illustrating that si through corporate resolution, power of attorney	ignatory is an authorized representative of the corporation; this may be shown y, printout from sunbiz.org, etc.
COUNTY OF DUVAL	
Sworn to and subscribed and	acknowledged before me by means of [_] physical presence
	this day of 20, by
	, as, of
	_, a corporation, who is personally
known to me or who has produced took an oath.	d as identification and who
	(Signature of NOTARY PUBLIC)
	(Printed name of NOTARY PUBLIC)
	State of Florida at Large.
	My commission expires:

# **Property Ownership Affidavit - Individual**

Date:	
City of Jacksonville	
Planning and Development Depa	rtment
214 North Hogan Street, Suite 30	00,
Jacksonville, Florida 32202	
Re: Property Owner Affidavit for Address: RE#(s):	the following site location in Jacksonville, Florida:
To Whom it May Concern:	
l,	hereby certify that
	cribed in Exhibit 1 in connection with filing application(s) for
	submitted to the
Jacksonville Planning and Develo	
Ву	
Print Name:	
STATE OF FLORIDA COUNTY OF DUVAL	
[_] online notarization, this	nowledged before me by means of [_] physical presence or day of, by, of
	, a corporation, who is
personally known to me or who land who took an oath.	nas produced as identification
_	
	(Signature of NOTARY PUBLIC)
	(Printed name of NOTARY PUBLIC)
	State of Florida at Large.
	My commission expires:

# **Agent Authorization – Limited Liability Company (LLC)**

Date:								
City of Jacksonville								
Planning and Developr	nent Departme	nt						
214 North Hogan Stree	et, Suite 300,							
Jacksonville, Florida 32	202							
Re: Agent Authorization	on for the follow	wing site loca	tion in Jacksor	nville, Florida	a:			
Address:				RE#(s):				
To Whom It May Conc	ern:							
You are hereby advised	d that				, as			of
		, hereby c	ertify that the				is the C	)wner
of the property	described	in Exhibit	1. Sai	d owner	hereby	authorizes	and empo	owers
				to act	as ager	nt to file	application(s)	for
					_			
with such authorization								
				-			necessary for	Sucii
requested change as s	ubmitted to the	e Jacksonville	Planning and	Developmer	it Departme	ent.		
(signature)								
(print name) _								
STATE OF FLORIDA								
COUNTY OF DUVAL								
Sworn to and s	subscribed and	acknowledge	d before me b	ov means of	[ ] physica	l presence or	[ ] online	
notarization, this						•		
								+h
personally known to m	ie or who has p	roduced			as idelitii	iication and v	VIIO LOOK ali Oa	ui.
		(Signature	of NOTARY P	JBLIC)		- <del></del>		
		(Printed na	ame of NOTAF	RY PUBLIC)				
		·		•				
			orida at Large. ission expires:					

# **Agent Authorization - Corporation**

Date:				
City of Jacksonville				
Planning and Developme	nt Department			
214 North Hogan Street,	Suite 300,			
Jacksonville, Florida 3220	)2			
Re: Agent Authorization	for the following site lo	cation in Jackso	nville, Florida:	
Address:		RE#(s):		
To Whom it May Concer	ո։			
You are hereby advised t	hat		_, as	of
	, a corp	oration organize	ed under the laws	of the state of,
hereby authorizes and er	mpowers			to act as agent to file
application(s) for				for the above referenced property
and in connection with s	uch authorization to file	such applicatio	ns, papers, docum	ents, requests and other matters
necessary for such reque	sted change as submitt	ed to the Jackso	nville Planning and	d Development Department.
(signature)				
(print name)				
STATE OF FLORIDA				
COUNTY OF DUVAL				
Sworn to and s	ubscribed and acknow	vledged before	me by means of	[_] physical presence or [_] online
notarization, this	day of	20	, by	, as
	, of		, a	corporation,
who is personally know	vn to me or who has p	oroduced		as identification and
who took an oath.				
	(Signat	ure of NOTARY	PUBLIC)	
	(Printe	d name of NOT	ARY PUBLIC)	
		f Florida at Lar nmission expire	_	

# <u> Agent Authorization – Individual</u>

Date:	
City of Jacksonville	
Planning and Development Department	
214 North Hogan Street, Suite 300,	
Jacksonville, Florida 32202	
Re: Agent Authorization for the following	g site location in Jacksonville, Florida:
Address:	
RE#(s):	
To Whom it May Concern:	
	, as
	, of,
	the Owner of the property described in Exhibit 1. Said owner
	to act as agent to
	for the above
referenced property and in connection	n with such authorization to file such applications, papers,
documents, requests and other matter	rs necessary for such requested change as submitted to the
Jacksonville Planning and Development D	Department.
Ву:	-
Print Name:	
rillit Name.	-
STATE OF FLORIDA	
COUNTY OF DUVAL	
Swarn to and subscribed and asknowled	ged before me by means of [_] physical presence or [_] online
notarization, this	
Tiotalization, this	,, ,
	, who is personally known to me or who has produced
as identi	fication and who took an oath.
ī	Signature of NOTARY PUBLIC)
`	is gradulte of the training of the state of
-	(Printed name of NOTARY PUBLIC)
•	State of Florida at Large.
,	My commission expires: