

**NOTICE OF APPEAL OF A
JACKSONVILLE HISTORIC PRESERVATION COMMISSION
CERTIFICATE OF APPROPRIATENESS**

I. INSTRUCTIONS

As provided in §307.201, Ordinance Code, any person with standing may appeal a Jacksonville Historic Preservation Commission final order on an application for a Certificate of Appropriateness to the City Council. An appeal must be filed **within 21 calendar days** after the final order granting, granting with conditions, or denying a Certificate is signed by the Commission Chairman. To appeal a Commission final order on an application for a Certificate, complete and submit this form to the Legislative Services Division, Suite 430, City Hall-St. James, 117 W. Duval Street, Jacksonville, Florida 32202 with the supporting documents (*see* Section III) and appropriate fees (*see* Section IV). A copy of the final order and the list of persons who testified before or wrote to the Commission about the Certificate (*see* Sec. III(1) and (4)) may be obtained from the Special Projects Branch of the Planning and Development Department, 7th Floor, Florida Theater Building, 128 E. Forsyth Street, Jacksonville, Florida 32202.

II. NOTICE OF APPEAL

I, _____, hereby file this Notice of Appeal from the final order of
PRINT NAME CLEARLY
the Jacksonville Historic Preservation Commission concerning Certificate of Appropriateness Number _____. I
am (Please circle one):

- (a) The person who filed the application for the Certificate of Appropriateness;
- (b) A person who owns, lives, or operates a business on property within 350 feet of the property which has been granted or denied the Certificate of Appropriateness;
- (c) A person, other than a member of the City Council, who provided a written statement or who testified before the Historic Preservation Commission *and* who is suffering or will suffer an adverse effect to an interest protected or furthered by Chapter 307, Ordinance Code. The statement must have been in writing, expressing a position on the merits of the application for the Certificate of Appropriateness, other than a petition, such as a letter, a memo or an e-mail, containing a reference to the specific application number and the name and mailing address of the person making the statement. The statement must have been specifically addressed to the City's Chief, Comprehensive Planning Division, or any member of the Historic Preservation Commission (with a copy to the Chief, Comprehensive Planning Division), and which was delivered to and received by the City's Planning and Development Department by hand delivery, mail, facsimile, or e-mail at least two working days before the public hearing at which the Commission took final action on the application for the Certificate, or which is read into the record at the public hearing, or distributed to the Commission at the hearing, with a copy to the Commission's staff.

III. SUPPORTING DOCUMENTS

To complete your Notice of Appeal, you **must** submit the following documents with this form:

- (1) A copy of the Final Order on the Certificate of Appropriateness you are appealing.
- (2) If you circled II(c) above, you must provide a statement of your interest sufficient to show how you are or will be *adversely* affected by the Commission's decision. Please provide this statement in the space below. If you need additional space, please attach a separate sheet.

(3) A description of the specific error(s) you believe the Commission committed. Please provide this description in the space below. If you need additional space, please attach a separate sheet.

(4) The list of the persons (names and complete addresses), certified by the Commission's staff, who testified before the Commission about the application for the Certificate, or who provided a written statement to the Commission about the application. **(You must pay a \$7.00 notification fee for each person on the list.)**

IV. FILING AND NOTIFICATION FEES

Section 307.203, Ordinance Code, requires persons appealing Final Orders on Certificates of Appropriateness to pay filing and notification fees. These fees must be paid at the time your Notice of Appeal is filed with the Legislative Services Division or your Appeal will not be accepted. You may include the filing and notification fees in one payment. Make checks payable to TAX COLLECTOR.

Filing Fee: \$800.00

Notification Fee: \$7.00 for each notification.

V. Contact Information

Please complete the following:

Name (Printed): _____

Address: _____

Daytime Phone Number: _____

Evening Phone Number: _____

E-mail address: _____

VI. CERTIFICATION

Please read, sign and date the following statement:

I have read and understand the information contained in this Notice of Appeal. I hereby certify that I have provided all the information required under §307.203, Ordinance Code, I understand that if this Notice of Appeal is incomplete, my appeal will not be processed until it is complete, and that it may be rejected for incompleteness. I further certify that all my statements in this Notice of Appeal are true and correct to the best of my knowledge.

Signature

Date