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| Date Submitted: |
| Date Filed:     |

|                     |
|---------------------|
| Application Number: |
| Public Hearing:     |

## Application for Waiver of Architectural and Aesthetic Requirements

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) 255-8300.

| For Official Use Only   |                            |                        |
|---|----------------------------|------------------------|
| Current Zoning District:  | Current Land Use Category: |                        |
| Council District:   | Planning District:         |                        |
| Previous Zoning Applications Filed (provide application numbers): |                            |                        |
| Applicable Section of Ordinance Code:                             |                            |                        |
| Notice of Violation(s):   |                            |                        |
| Neighborhood Associations:  |                            |                        |
| Overlay:  |                            |                        |
| Number of Signs to Post:  | Amount of Fee:             | Zoning Asst. Initials: |

| 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 Provider:<br>City Water / City Sewer <input type="checkbox"/><br>Well / Septic <input type="checkbox"/> |
| 7. Waiver Sought:<br>_____<br>_____          |   |
| 8. In whose name will the Waiver be granted? |   |

| <b>OWNER'S INFORMATION (please attach separate sheet if more than one owner)</b> |                          |
|--|--------------------------|
| 9. Name:   | 10. E-mail:              |
| 11. Address (including city, state, zip):  | 12. Preferred Telephone: |

| <b>APPLICANT'S INFORMATION (if different from owner)</b> |                          |
|--|--------------------------|
| 13. Name:  | 14. E-mail:              |
| 15. Address (including city, state, zip):                | 16. Preferred Telephone: |

| <b>CRITERIA</b>  |
|--|
| <p>Section 656.436(a)1 through 4, Ordinance Code, provides that, with respect to action upon Applications for Waivers, the Planning Commission shall grant a waiver for relief from the minimum architectural and aesthetic requirements for a single-family dwelling if, based on competent and substantial evidence, the application meets all of the following criteria:</p> <ol style="list-style-type: none"> <li>1. <i>There are practical or economic difficulties in carrying out the strict letter of the regulation;</i></li> <li>2. <i>The request is not based exclusively upon the desire to reduce the cost of constructing or siting the single-family dwelling;</i></li> <li>3. <i>The proposed waiver will not substantially diminish property values in, nor alter the essential character of the area surrounding the single family dwelling and will not substantially interfere with or injure the rights of others whose property would be affected by the waiver; and</i></li> <li>4. <i>The proposed waiver will not be detrimental to the public health, safety or welfare, result in additional expense, the creation of nuisances or conflict with any other applicable law.</i></li> </ol> |

17. Given the aforementioned criteria by which the request will be reviewed against, please describe the reason that the waiver 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 request and to meet the criteria set forth may result in a denial.

#### ATTACHMENTS

The following attachments must accompany each copy of the application.

- ☐ Survey
- ☐ Site Plan – two (2) copies on 8 ½ x 11 and two (2) copies on 11 x 17 or larger
- ☐ Photographs and/or elevation drawings of the proposed dwelling.
- ☐ Photographs of single family dwellings within the immediate neighborhood (within 350 feet of subject property)
- ☐ Property Ownership Affidavit (Exhibit A)
- ☐ Agent Authorization if application is made by any person other than the property owner (Exhibit B)
- ☐ Legal Description – may be written as either lot and block, or metes and bounds (Exhibit 1)
- ☐ Proof of property ownership – may be print-out of property appraiser record card if individual owner, [http://apps.coj.net/pao\\_propertySearch/Basic/Search.aspx](http://apps.coj.net/pao_propertySearch/Basic/Search.aspx), or print-out of entry from the Florida Department of State Division of Corporations if a corporate owner, <http://search.sunbiz.org/Inquiry/CorporationSearch/ByName>.

**FILING FEES**

\*Applications filed to correct existing zoning violations are subject to a double fee.

| <u>Base Fee</u>                   | <u>Public Notices</u> | <u>Advertisement</u>           |
|-----------------------------------|-----------------------|--------------------------------|
| Residential Districts: \$1,161.00 | \$7.00 per Addressee  | Billed directly to owner/agent |

**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.

**I hereby certify that I have read and understand** 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.

|  |   |
|--|---|
| <b>Owner(s)</b><br>Print name: _____<br>Signature: _____ | <b>Applicant or Agent (if different than owner)</b><br>Print name: _____<br>Signature: _____<br><br><i>*An agent authorization letter is required if the application is made by any person other than the property owner.</i> |
| <b>Owner(s)</b><br>Print name: _____<br>Signature: _____ |   |

**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

## **Instructions for Completing an Application for Waiver of Architectural and Aesthetic Requirements**

### **SUBMITTAL**

Any Application for Zoning Variance (V), Exception (E), Sign Waiver (SW), Waiver of Liquor Distance (WLD), Waiver of Required Minimum Road Frontage (WRF), Waiver of Architectural and Aesthetic Requirements (WAAR), 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 an **Application for Waiver of Architectural and Aesthetic Requirements**. 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](http://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 the relief from which the waiver is being sought.

#### ***Item 8***

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

### **PLANNING AND DEVELOPMENT DEPARTMENT**

## **Instructions for Completing an Application for Waiver of Architectural and Aesthetic Requirements**

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. When the use requires licensure or other approvals by the State or any other governmental entity, such as a liquor license approval, the waiver granted in connection with such use shall be granted to the applicant or the State license holder.

- **OWNER'S INFORMATION BOX**

***Items 9-12***

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 13-16***

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 17***

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 all required attachments. All required attachments should be provided on 8 ½ " 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)
- Proof of property ownership, may be a print-out of property appraiser record card if individual owner ([http://apps.coj.net/pao\\_propertySearch/Basic/Search.aspx](http://apps.coj.net/pao_propertySearch/Basic/Search.aspx)); or print-out of entry from the Florida Department of State Division of Corporations if a corporate owner (<http://search.sunbiz.org/Inquiry/CorporationSearch/ByName>).

### **PLANNING AND DEVELOPMENT DEPARTMENT**

## **Instructions for Completing an Application for Waiver of Architectural and Aesthetic Requirements**

- Photographs and/or elevation drawings of the proposed dwelling.
- Photographs of single family dwellings within the immediate neighborhood (within 350 feet of the subject property)

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)
- Loading and unloading area, if applicable, with turn-around area and dimensions
- Landscape areas and dimensions
- 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.

### **NOTIFICATIONS**

- When your completed application is submitted and accepted as sufficient, a list of property owners (addressee) within a 350-foot radius of the property will be prepared by the Department. These property owners will be mailed a notice of public hearing.
- For all applications, except 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.
- 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**

**Legal Description**  
**Exhibit 1**  
**June 30, 2021**



**Property Ownership Affidavit – Limited Liability Company (LLC)**

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

City of Jacksonville  
Planning and Development Department  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Property Owner Affidavit for the following site location in Jacksonville, Florida:

Address: \_\_\_\_\_ RE#(s): \_\_\_\_\_

To Whom it May Concern:

I \_\_\_\_\_, as \_\_\_\_\_ of \_\_\_\_\_,  
a Limited Liability Company organized under the laws of the state of \_\_\_\_\_, hereby certify  
that said LLC is the Owner of the property described in Exhibit 1 in connection with filing application(s)  
for \_\_\_\_\_ submitted to the Jacksonville Planning and Development  
Department.

(signature) \_\_\_\_\_

(print name) \_\_\_\_\_

Please provide documentation illustrating that signatory is an authorized representative of the LLC. This may be shown through a printout from sunbiz.org showing that the person is either a "sole member" or a "managing member." Other persons may be authorized through a resolution, power of attorney, etc.

**STATE OF FLORIDA  
COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of [ ] physical  
presence or [ ] online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by  
\_\_\_\_\_, as \_\_\_\_\_, of  
\_\_\_\_\_, a \_\_\_\_\_ corporation, who is personally  
known to me or who has produced \_\_\_\_\_ as identification and who  
took an oath.

\_\_\_\_\_  
(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  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Property Owner Affidavit for the following site location in Jacksonville, Florida:

Address: \_\_\_\_\_ RE#(s): \_\_\_\_\_

To Whom it May Concern:

I \_\_\_\_\_, as \_\_\_\_\_ of  
\_\_\_\_\_ corporation, hereby certify that said  
corporation is the Owner of the property described in Exhibit 1 in connection with filing application(s)  
for \_\_\_\_\_ submitted to the Jacksonville Planning and Development Department.

(signature) \_\_\_\_\_

(print name) \_\_\_\_\_

Please provide documentation illustrating that signatory is an authorized representative of the corporation; this may be shown through corporate resolution, power of attorney, printout from sunbiz.org, etc.

**STATE OF FLORIDA  
COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of [ ] physical presence  
or [ ] online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by  
\_\_\_\_\_, as \_\_\_\_\_, of  
\_\_\_\_\_, a \_\_\_\_\_ corporation, who is personally  
known to me or who has produced \_\_\_\_\_ as identification and who  
took an oath.

\_\_\_\_\_  
(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 Department  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Property Owner Affidavit for the following site location in Jacksonville, Florida:

Address: RE#(s):

To Whom it May Concern:

I, \_\_\_\_\_ hereby certify that \_\_\_\_\_  
is the Owner of the property described in Exhibit 1 in connection with filing application(s) for  
\_\_\_\_\_ submitted to the  
Jacksonville Planning and Development Department.

By \_\_\_\_\_

Print Name: \_\_\_\_\_

### **STATE OF FLORIDA COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of ☐ physical presence or  
☐ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by  
\_\_\_\_\_, as \_\_\_\_\_, of  
\_\_\_\_\_, a \_\_\_\_\_ corporation, who is  
personally known to me or who has produced \_\_\_\_\_ as identification  
and who took an oath.

—

\_\_\_\_\_  
(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 Development Department  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Agent Authorization for the following site location in Jacksonville, Florida:

Address: \_\_\_\_\_ RE#(s): \_\_\_\_\_

To Whom It May Concern:

You are hereby advised that \_\_\_\_\_, as \_\_\_\_\_ of \_\_\_\_\_, hereby certify that the \_\_\_\_\_ is the Owner of the property described in Exhibit 1. Said owner hereby authorizes and empowers \_\_\_\_\_ to act as agent to file application(s) for \_\_\_\_\_ for the above referenced property and in connection with such authorization to file such applications, papers, documents, requests and other matters necessary for such requested change as submitted to the Jacksonville Planning and Development Department.

(signature) \_\_\_\_\_

(print name) \_\_\_\_\_

**STATE OF FLORIDA  
COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of ☐ physical presence or ☐ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_, as \_\_\_\_\_, of \_\_\_\_\_, a \_\_\_\_\_ corporation, who is personally known to me or who has produced \_\_\_\_\_ as identification and who took an oath.

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

\_\_\_\_\_  
(Printed name of NOTARY PUBLIC)

State of Florida at Large.

My commission expires: \_\_\_\_\_

## **Agent Authorization - Corporation**

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

City of Jacksonville  
Planning and Development Department  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Agent Authorization for the following site location in Jacksonville, Florida:

Address: \_\_\_\_\_ RE#(s): \_\_\_\_\_

To Whom it May Concern:

You are hereby advised that \_\_\_\_\_, as \_\_\_\_\_ of  
\_\_\_\_\_, a corporation organized under the laws of the state of \_\_\_\_\_,  
hereby authorizes and empowers \_\_\_\_\_ to act as agent to file  
application(s) for \_\_\_\_\_ for the above referenced property  
and in connection with such authorization to file such applications, papers, documents, requests and other matters  
necessary for such requested change as submitted to the Jacksonville Planning and Development Department.

(signature) \_\_\_\_\_

(print name) \_\_\_\_\_

### **STATE OF FLORIDA COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of ☐ physical presence or ☐ online  
notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_, as  
\_\_\_\_\_, of \_\_\_\_\_, a \_\_\_\_\_ corporation,  
who is personally known to me or who has produced \_\_\_\_\_ as identification and  
who took an oath.

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

\_\_\_\_\_  
(Printed name of NOTARY PUBLIC)

State of Florida at Large.

My commission expires: \_\_\_\_\_

## **Agent Authorization – Individual**

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

City of Jacksonville  
Planning and Development Department  
214 North Hogan Street, Suite 300,  
Jacksonville, Florida 32202

Re: Agent Authorization for the following site location in Jacksonville, Florida:

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

RE#(s): \_\_\_\_\_

To Whom it May Concern:

You are hereby advised that \_\_\_\_\_, as  
\_\_\_\_\_ of \_\_\_\_\_,  
hereby certify that said undersigned is the Owner of the property described in Exhibit 1. Said owner  
hereby authorizes and empowers \_\_\_\_\_ to act as agent to  
file application(s) for \_\_\_\_\_ for the above  
referenced property and in connection with such authorization to file such applications, papers,  
documents, requests and other matters necessary for such requested change as submitted to the  
Jacksonville Planning and Development Department.

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

### **STATE OF FLORIDA COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me by means of ☐ physical presence or ☐ online  
notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_, who is personally known to me or who has produced  
\_\_\_\_\_ as identification and who took an oath.

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

\_\_\_\_\_  
(Printed name of NOTARY PUBLIC)

State of Florida at Large.

My commission expires: \_\_\_\_\_