

City Of Starke

BUILDING, ZONING & PLANNING

*Post Office Drawer C * 209 N. Thompson Street*

Starke, Florida 32091

*Ph.: (904) 964-5027 * Fax: (904) 964-3998*

INSTRUCTIONS FOR FILING **LAND DEVELOPMENT CODE AMENDMENTS**

Application may be filed by the property owner or his/her authorized agent at the City of Starke Zoning Office, located at 209 N. Thompson Street, Starke Florida, at least 30 days prior to the public hearing by the Zoning Board which meets the 3rd Monday of each month.

The application must be filed in the name of the property owner(s). If more than one name is on the deed and the owners are not being represented by an agent each person on the deed will need to sign the application. The applicant/agent shall fill out the application. If agent represents owner(s) please attached notarized letter of authorization to application. All names listed on the deed, must sign authorization letter or the application.

The NON-REFUNDABLE fee for filing for a Rezoning is \$1,950.00

The applicant/agent shall post sign(s) on the property for Rezoning. Sign(s) shall be posted not less than 12 days prior to the scheduled hearing by the Zoning Board. The sign(s) shall be erected on each street side of property. Sign(s) will be given to applicant/agent at time application is made. Once hearing is over the sign(s) needs to be removed.

On site investigations of the sign(s) will be made by the Zoning Office and pictures taken. Failure to post sign(s) in a timely manner will prohibit application from being heard at the meeting.

The first public hearing will be heard by the City of Starke Zoning Board also serving as the Local Planning Agency. The Zoning Board will hear the request and make a recommendation to the City Commission.(The Zoning Boards also serving as the Local Planning Agency recommendation will not be binding upon the City Commission). The City Commission will then hold public hearings needed at their regular scheduled meetings and decide to approve or deny the request.

Any citizen will have the opportunity to be heard at the hearings, and are normally allowed five (5) minutes to speak. If you think you may want to appeal the decision of the Board, you will need a record of the proceedings, and for such purpose you should ensure that verbatim record of the proceedings is made at your expense, which record includes the testimony and evidence upon which the appeal is based.

The Zoning office will place a legal notice of the time and place of the public hearing in the Bradford County Telegraph at least 10 days prior to the hearing. The Zoning Office will also notify by mail the property owners within 300 feet of the request 10 days prior to the hearings.

The following information is required to be submitted along with the application:

- Copy of Deed
- Exact Legal Description of portion of parcel requested to change:
- 2 copies of aerial with overlay of property at 600 scale from Bradford County Property Appraiser's Office located at the Bradford County Courthouse showing entire section.
- List of Property owners within 300 feet of the affected property. This list can also be obtained from the Bradford County Property Appraiser's Office.

CITY OF STARKE
LAND DEVELOPMENT CODE APPLICATION

Name of Applicant: _____

Address: _____

City, State, Zip Code: _____

Telephone: _____

Title Holder's Representative (Agent), if applicable: _____

Address: _____

City, State, Zip Code: _____

Telephone: _____

Please complete the following for proposed amendments to the Official Zoning Map. For amendments to the text of the Land Development code, which do not require an Official amendment, please omit responses to Part I and complete Part II of this application.

PART 1

Legal Description: (attach deed and or survey)

Parcel Number: _____

Section: _____ Township: _____ Range: _____

Total acreage of land to be considered under this amendment: _____

Present use of land: _____
Commercial, Industrial, Residential, Agricultural, Vacant, etc.

Future Land Use Plan Map Category: _____

Zoning District:
Present: _____

Requested: _____

PART II

for amendments to the text of the Land Development Code, please provide on separate pages to be attached and made a part herewith to the text of the proposed amendment.

A previous application for amendment to the Land Development code:

was made with respect to these premises,

Application Number:

was not made with respect to these premises.

I DO 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 Name (Type or Print)

Applicant/Agent Signature

Applicant/Agent Signature

Date: _____

Date: _____

RE-ZONING APPLICATION FEE IS NON-REFUNDABLE

FOR OFFICE USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE:

Date Filed: _____

Re-Zoning Application No: _____

Fee Amount: _____

Receipt No: _____

Date of Planning and Zoning Board Public Hearing: _____

Date notice published: _____

Newspaper: B.C. TELEGRAPH

Date of Local Planning Agency Public hearing: _____

Date notice published: _____

Newspaper: B.C. TELEGRAPH

Date(s) of City commisiioners Public Hearing(s): _____

First Reading: _____

Date notice published (if Applicable): _____

Date of Enactment: _____

Date Notice Published: _____

Newspaper: _____

BRADFORD COUNTY TELEGRAPH

City Commisssion Decision: _____