



Bradford County ~ City of Starke
Building, Zoning & Planning
P.O. Box 1148 ~ 945-F North Temple Ave.
Starke, FL 32091
Phone: 904-966-6213 / 904-966-6223
Fax: 904-966-6220



INSTRUCTIONS FOR FILING
LAND DEVELOPMENT REGULATION AMENDMENTS
BRADFORD COUNTY

- ❖ Application may be filed by the property owner or his/her authorized agent at the Bradford County Zoning Office, North Wing of the Bradford County Courthouse, Starke Florida, at least 30 days prior to the public hearing by the Zoning Board. 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 needs 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 on deed must sign letter of authorization or application.
- ❖ The fee for filing for a Rezoning is \$1700.00
- ❖ The applicant shall post sign(s) on the property for Rezoning. Sign(s) shall be posted not less than 15 days prior to the scheduled hearing by the Zoning Board. The signs shall be erected on each street side of property. Signs will be given to applicants 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 signs in a timely manner will prohibit application from being heard at the meeting.
- ❖ The first public hearing is by the Zoning Board serving also as the Local Planning Agency. The Zoning Board will hear the request and make a recommendation to the Board of County Commission (The Zoning Boards recommendation will not be binding upon the Board of County Commission). The Board of County Commission will then hold a public hearing 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 following information is required to be submitted along with the application:
 - ❖ Copy of Deed
 - ❖ 2 copies of aerial with overlay of property at 600 scale showing entire section with section lines from Property Appraiser's Office

**BRADFORD COUNTY
LAND DEVELOPMENT REGULATIONS AMENDMENT
APPLICATION**

Name of Applicant(s): _____

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 Atlas. For amendments to the text of the Land Development Regulations, which do not require an Official Zoning Atlas amendments, please omit to Part I and complete Part II for this Application.

**PART I
Legal Description:(attach exact legal of property to be changed)**

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 Regulations, please provided on separate pages to be attached and made a part herewith the text of the proposed amendment.

A previous application for amendment to the Land Development Regulations:

_____ was made with respect to these premises, Application No. _____

_____ was not made with respect to these premises.

I HEREBY CERTIFY THAT ALL OF THE ABOVE 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

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

Date Filed: _____

Rezoning Application No: _____

Fee Amount: _____

Receipt No: _____

Date of Planning & 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 Bd. of County Commissioners Public Hearing(s):

1ST _____

2ND _____

1ST _____

2ND _____

Date(s) notice published: _____

Newspaper: _____

BRADFORD COUNTY TELEGRAPH

Date notice of Enactment of Ordinance published: _____

Newspaper: _____

BRADFORD COUNTY TELEGRAPH

Board of County Commissioner decision: _____

(Granted/Denied)