

**CHANGE OF ZONING APPLICATION  
LEVY COUNTY, FLORIDA**

**Filing Date:** \_\_\_\_\_  
**Amount of Fee: \$ 600.00**

**Petition Number**   CZ    
**Validation Number** \_\_\_\_\_

**TO THE LEVY COUNTY PLANNING COMMISSION:**

A Change of Zoning is intended to provide for a land use change and activities not permitted “By Right” or as a “Special Exception” in the applicable zoning district. The proposed use or activity must meet the standards below. [Source: Levy County Code of Ordinances, Section 50-664]

Application is hereby made to the County Commission of Levy County, Florida pursuant to the provisions of the Florida Statutes, as amended, and the Levy County Zoning Ordinance petitioning for a Change of Zoning on the following described property:

<b>I. APPLICANT AND REQUEST INFORMATION:</b> Please print unless otherwise specified.	
Applicant's Name _____	Owner's Name _____
Address _____	Address _____
Zip Code _____	Zip Code _____
Phone No. (____) _____	Phone No. (____) _____

<b>II. PARCEL INFORMATION</b>		
Parcel Number (s)	Section/Township/Range	Acreage
1. _____	_____	_____
2. _____	_____	_____
		Total Acreage _____
Subdivision name (if applicable): _____		
<b>Legal Description: Provide most current deed. See required attachments.</b>		

<b>III. CHANGE OF ZONING AND LAND USE INFORMATION:</b>
1. Current Land Use: _____
It is desired that the zoning district boundaries shown on the Official Zoning Districts Map be amended and the area described above be changed from the present _____ district to _____ district.

Requested Use and Activities and Development associated with the Proposed Change of Zoning

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(\*Use additional sheets if needed)

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Current Use (Actual) and Improvements on the Property: (i.e. Single family home, well and septic, pole barn, etc...)

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Directions to the Property: (Please start directions from a State or County Road):

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**IV. TO BE SUPPLIED AT THE TIME OF SUBMISSION:** Attach the items in the order listed below. The application will not be processed without these items. Any information changes must be submitted, in writing, to the Development Department and received one week prior to the Planning Commission Public Hearing.

\* Upon completion of the above application, **please submit the original application and supporting documents along with 24 copies of the same** to the Levy County Development Department, 622 East Hathaway Avenue, Bronson, Florida, for processing.

**Property Description**

- Property Deed:** The most recent one pertaining to the proposed amendment property; obtained from the Clerk of the Circuit Court's Office.
- Legal Description.** The legal description must be signed and sealed by a certified Registered Land Surveyor (RLS), (PLS, PMS) or a Civil Engineer.
- Photographs.** Provide at least four (4) photographs showing site views from the site looking north, south, east and west. Identify the photo viewpoint and provide a brief description beneath each view. Additional photos showing relevant information may also be included.

**Maps:** All required maps and information can be obtained at the Levy County Property Appraiser's Office.

- Property Appraiser's Parcel Map.**
  1. Identify the proposed site clearly using a color or pattern.
  2. Identify on the map the existing uses within 300 (three hundred) feet of the subject property's boundary using the following descriptive types: Residential, Commercial, Industrial, Recreation, Crops/Farming, Silviculture and Undeveloped. Please indicate all uses on the adjacent property. For example, residence and crops/farm, or Commercial/restaurant and recreational/golf course.

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3. Identify the FLUM designation and zoning classifications for those properties identified by question #2.
- Property Appraiser's Aerial Photograph with Parcel Overlay.** Identify the proposed site clearly using a bright color or pattern taking care to obscure as little information as possible.

**Documentation**

- Existing Conditions and Compatibility on Property adjacent to the proposed amendment site.** Provide a cover letter for this application which documents in writing how you believe the proposed Change of Zoning will be compatible with the adjoining development and the proposed zoning district where it is to be located.
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**V. Additional Written and Mapping Documentation is required for proposed Change of Zonings that may have impacts that exceed those uses permitted by right in the inapplicable Zoning Districts.** Confirm with the Development Department whether or not the proposed may require additional documentation.

**VI. COMPREHENSIVE PLAN.** The proposed use must be compatible with the Comprehensive Plan and Future Land Use Map. Refer to the adopted Levy County Comprehensive Plan for applicable goals, objectives and policies. For assistance, call the Levy County Planning Department at 352/486-5405.

**VII. APPLICATION INSTRUCTIONS**

- (a) An application for a Change of Zoning must be accompanied with a fee of \$600.00. Please note, the application fee may be subject to change. Confirm fee at the time of application. **Note: All copies must be bound and collated.**
- (b) If the applicant is not the owner of record of the property, the owner must agree to this application either by signing the application form, or by submitting a notarized letter authorizing the applicant to act as an agent. **Owner's authorization is required at the time this application is submitted.**
- (c) **All required documentation and submission material is required to accompany the application at the time the request is submitted. Applications are screened for completeness. Depending on the proposed use, additional information may be required. Failure to provide all information and submission material required shall delay the public review of the application until such time as all materials are received.**

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- ( d ) The minimum criteria for the applicable zoning district must be met uniformly for every change of zoning. These standards are not exclusive of any other standards which may be established by the Planning Commission due to particular circumstances which are unique to the property for which the change of zoning is being requested.
- ( e ) **Change of Zoning applications are processed once a month. Applications received and found complete by the first day of the month will tentatively be scheduled, advertised and presented at the public hearing the following month. Applications received after the first day of the month will not be scheduled for the following month.**
- ( f ) Any information changes must be submitted, in writing, to the Development Department and received 10 days prior to the Planning Commission Public Hearing.
- ( g ) Applications may be submitted as follows:
  - In Person: Levy County Development Department, located on Alternate 27 (622 East Hathaway Avenue), within the Levy County Building and Zoning Office.
  - By Mail: Levy County Development Department, Post Office Box 672, Bronson, Florida, 32621.
- ( h ) With approval by the Development Director, this office will prepare 2 posters (Notice of Land Use Action) and place them on the subject property approximately 2 weeks prior to the public hearing.
- ( I ) Abutting property owners will be notified by mail of the request. “Abutting property” is any property immediately adjacent or contiguous to the property which is the subject of this request or located within 300 (three hundred) feet of the subject property lines including, immediately across any road or public right-of-way for said property.
- ( j ) It is highly advised that the applicant or representative be present at the Public Hearing by the Planning Commission and the Board of County Commissioners. The Commission, at its discretion, may defer action, or take decisive action on any application.

**Additional Assistance:** If you require further information, please contact the Levy County Development Department at (352) 486-5203 or visit the above address in person.

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**VIII. CERTIFICATION**

The undersigned has read and understands the application, and has received, read and understands the submittal requirements. It is agreed and understood that the undersigned will be held responsible for the accuracy of the application and information submitted. The undersigned hereby attests to the fact that the parcel number (s) and legal description (s) provided is/are the true and proper identification of the area of which the petition is being submitted. Signatures of all owners or their agents are required on this form. Signatures by other than the owner (s) will be accepted only with notarized proof of authorization by the owner (s).

**Owner of Record**

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

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

Phone: \_\_\_\_\_

**Owner of Record**

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

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

Phone: \_\_\_\_\_

No person submitting an application may rely upon any comment concerning a proposed amendment, or any expression of any nature about the proposal made by any participant, at the pre-application conference as a representation or implication that the proposal will be ultimately approved or rejected in any form. To meet with staff to discuss the proposal, please call (352) 486-5203 for an appointment.

**OWNER VERIFICATION**

I hereby certify that the information contained in this application and its supplements are true and correct, and that I am the legal owner of the above described property.

\_\_\_\_\_  
Date Owner Signature

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_  
\_\_\_\_\_  
Owner Signature

Sworn to and scribed before me this \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_, by (name)  
\_\_\_\_\_ .

\_\_\_\_\_  
Signature - Notary Public

Personally known \_\_\_\_\_ Identification Expiration Date \_\_\_\_\_

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**AGENT VERIFICATION (if applicable)**

I hereby certify that the information contained in this application and its supplements are true and correct, and that I am the authorized agent of the above described property.

\_\_\_\_\_ Date

\_\_\_\_\_ Authorized Agent Signature (if applicable)

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to and scribed before me this \_\_\_\_\_ Day of \_\_\_\_\_ 20 \_\_\_\_, by (name)

\_\_\_\_\_ .

\_\_\_\_\_ Signature - Notary Public

Personally known \_\_\_\_\_ Identification Expiration Date \_\_\_\_\_

<b>Office Use Only:</b>	<i>PC Public Hearing Date</i> _____
	<i>Recommendation: Approval</i> _____ <i>Denial</i> _____
	<i>BOCC Public Hearing Date</i> _____ <i>BOCC Action</i> _____
	<i>Ordinance Number</i> _____ <i>Adoption Date</i> _____

