MADISON COUNTY, FLORIDA
Building & Zoning Department — Planning & Zoning Board (Local Planning Agency)
229 SW Pinckney Street, Suite 219 • P.O. Box 539 • Madison, Florida 32340
Phone (850) 973-6785 • madisoncountyfl.com

FOR OFFICE USE ONLY
Application No. CPA- _____
Related Rezoning File No. _____
Application Fee $ _____
Receipt No. _____
Date Filed _____
Completeness Date _____
Reviewed By _____

COMPREHENSIVE PLAN AMENDMENT APPLICATION

and Companion Application for Rezoning (Official Zoning Atlas Amendment)

Filed pursuant to Chapter 1, § 1.8, and Chapter 3, § 3.5-1, Madison County Land Development Code, and Sections 163.3184 and 163.3187, Florida Statutes

NOTICE TO APPLICANT

This application must be typed or printed legibly and submitted in triplicate (three (3) complete copies), together with all attachments required in Part I, Section 9 (and, if applicable, Part II, Section D), and the applicable filing fee, to the Madison County Building & Zoning Department, 229 SW Pinckney Street, Suite 219, Madison, Florida 32340. No application will be accepted or processed until it is complete and the required fee has been paid. Applications determined to be incomplete will not be scheduled for public hearing until all deficiencies identified in the written completeness review have been corrected.

THE APPLICANT OR THE APPLICANT'S AUTHORIZED AGENT MUST BE PRESENT AT EACH PUBLIC HEARING BEFORE THE PLANNING & ZONING BOARD (LOCAL PLANNING AGENCY) AND THE BOARD OF COUNTY COMMISSIONERS, AS REQUIRED BY THE BOARD'S ADOPTED RULES OF PROCEDURE. FAILURE TO APPEAR MAY RESULT IN THE REQUEST BEING CONTINUED TO A FUTURE HEARING DATE.

PART I — COMPREHENSIVE PLAN AMENDMENT APPLICATION

SECTION 1. TYPE OF AMENDMENT REQUESTED

☐ Future Land Use Map (FLUM) Amendment – a site-specific change to the Future Land Use classification of the subject property.

☐ Text Amendment – a proposed change to the Goals, Objectives, and Policies of the Comprehensive Plan. If checked, attach the proposed text in strike-through and underline format (Part I, Section 9, Item 6).

SECTION 2. AMENDMENT CLASSIFICATION (LDC §§ 1.8-1, 1.8-2)

The final classification of the amendment is determined by the County Administrator/Planning Department. Applicants should review Chapter 1, Section 1.8 of the Land Development Code.

☐ Standard Amendment (LDC § 1.8-1; § 163.3184, Fla. Stat.) – requires review by the Local Planning Agency and two (2) public hearings before the Board of County Commissioners (transmittal and adoption), with review by the state land planning agency (Florida Department of Commerce).

☐ Small-Scale Amendment (LDC § 1.8-2; § 163.3187, Fla. Stat.) – by checking this box, the Applicant certifies that ALL of the following apply:

☐ The subject property is ten (10) acres or less (twenty (20) acres or less if located within a Rural Area of Opportunity designated under § 288.0656(2)(d), Fla. Stat.);

☐ The cumulative acreage of all small-scale amendments adopted by Madison County during the current calendar year, including this application, will not exceed one hundred twenty (120) acres;

☐ This application does not propose a text change to the Comprehensive Plan's Goals, Objectives, or Policies; and

☐ The subject property is not located within an Area of Critical State Concern.

SECTION 3. PROPERTY INFORMATION

Project Name: _____

Address of Subject Property: _____

Parcel ID Number(s): _____ **Section / Township / Range:** _____

Total Acreage: _____ **Existing Use of Property:** _____ **Proposed Use of Property:** _____

Existing Future Land Use Map Designation (check one):

☐ Agriculture-1 (A-1) ☐ Agriculture-2 (A-2) ☐ Residential

☐ Commercial ☐ Industrial ☐ Public

☐ Conservation ☐ Recreation ☐ Highway Interchange

☐ Mixed Use ☐ Commerce Park

Proposed Future Land Use Map Designation (check one):

☐ Agriculture-1 (A-1) ☐ Agriculture-2 (A-2) ☐ Residential

☐ Commercial ☐ Industrial ☐ Public

☐ Conservation ☐ Recreation ☐ Highway Interchange

☐ Mixed Use ☐ Commerce Park

Current Zoning Designation: _____ **Proposed Zoning Designation (if known):** _____

Note: Madison County's Future Land Use Map designations correspond to the Land Use Districts established in Chapter 4 of the Land Development Code. If this amendment will also require a change to the Official Zoning Atlas, complete Part II of this application.

SECTION 4. APPLICANT INFORMATION

☐ **Owner (title holder)** ☐ **Agent**

Name of Applicant(s): _____

Title: _____ **Company Name (if applicable):** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: ( ) _____ **Fax: ( )** _____

Email: _____

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business are public records subject to disclosure. Your e-mail address and communications may be subject to public disclosure.

SECTION 5. PROPERTY OWNER INFORMATION (complete only if the Applicant is an Agent)

Property Owner Name (title holder): _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: ( ) _____ **Fax: ( )** _____

Email: _____

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business are public records subject to disclosure. Your e-mail address and communications may be subject to public disclosure. An executed Property Owner Affidavit / Agent Authorization Form (signed and notarized) authorizing the Agent to act on behalf of the Property Owner must accompany this application. See Part I, Section 9, Item 8.

SECTION 6. OWNERSHIP AND APPLICANT INTEREST (LDC § 3.5-1(4)(d))

The Applicant's interest in the subject property is (check all that apply and attach the corresponding documentation):

☐ Sole Owner of Record – copy of the latest recorded warranty deed attached.

☐ Joint or Several Ownership – written consent of all owners of record attached.

☐ Contract Purchaser – copy of the purchase contract and written consent of the seller/owner attached.

☐ Authorized Agent – copy of the agency agreement or written consent of the principal/owner attached.

☐ Corporation or Other Business Entity – name/title of the authorized representative and written proof of delegated authority attached.

☐ Group of Contiguous Property Owners – written consent of at least fifty-one percent (51%) of contiguous property owners attached.

SECTION 7. RELATED APPLICATIONS AND CONTRACTS

7.1 Is there any contract for sale of, or option to purchase, the subject property? ☐ Yes ☐ No

If yes, list the names of all parties involved: _____

If yes, the contract/option is: ☐ Contingent ☐ Absolute

7.2 Has a previous application been filed on all or part of the subject property?

Application Type	Filed?	Application No.
Future Land Use Map Amendment	☐ Yes ☐ No	_____
Rezoning (Official Zoning Atlas Amendment)	☐ Yes ☐ No	_____
Variance	☐ Yes ☐ No	_____
Special Exception	☐ Yes ☐ No	_____

SECTION 8. REASON FOR / JUSTIFICATION OF REQUEST

State the special reasons the requested amendment is needed and justified, including its consistency with the Goals, Objectives, and Policies of the Comprehensive Plan. (A detailed written Comprehensive Plan Consistency Analysis must also be attached – see Part I, Section 9, Item 5.)

_____

_____

_____

_____

_____

SECTION 9. REQUIRED ATTACHMENTS — SUBMIT THREE (3) COPIES OF EACH ITEM

Attached	No.	Description
☐	**1**	Completed and Signed Application Form (this document), submitted in triplicate (three (3) copies).
☐	**2**	Boundary Sketch or Survey, with bearings and dimensions.
☐	**3**	Aerial Photograph of the subject property (available from the Madison County Property Appraiser's Office).
☐	**4**	Concurrency Impact Analysis of impacts to public facilities, including but not limited to transportation, potable water, sanitary sewer, and solid waste. For residential land use amendments, an analysis of impacts to public schools is also required.
☐	**5**	Comprehensive Plan Consistency Analysis identifying the specific Goals, Objectives, and Policies of the Comprehensive Plan and detailing how the application complies with them. For text amendments, the proposed text must be provided in strike-through and underline format.
☐	**6**	Legal Description with Tax Parcel Number, provided in Microsoft Word format.
☐	**7**	Proof of Ownership (e.g., certified copy of the recorded warranty deed).
☐	**8**	Agent Authorization Form / Property Owner Affidavit, signed and notarized (required only if the Applicant is an Agent).
☐	**9**	Proof of Payment of Property Taxes (available online from the Madison County Tax Collector's Office).
☐	**10**	Application Fee, as determined by the scale of the Comprehensive Plan Amendment (see Section 2). No application will be accepted or processed until the required fee has been paid.

NOTICE TO APPLICANT: All ten (10) items listed above are required for a complete application. Once an application is submitted and the fee is paid, a completeness review will be conducted. If deficiencies are identified, the Applicant will be notified in writing. An application determined to be incomplete may be delayed in scheduling before the Planning & Zoning Board.

For additional submittal requirements, see the Madison County Building and Zoning Development Application Submittal Guidelines.

SECTION 10. CERTIFICATION AND SIGNATURE

I hereby certify, under penalty of perjury, that all statements made in this application, and in any documents or plans submitted herewith, are true and accurate to the best of my knowledge and belief. I acknowledge that the Applicant or the Applicant's authorized Agent must be present at the public hearing(s) before the Planning & Zoning Board (Local Planning Agency) and the Board of County Commissioners, as required by the Board's adopted Rules of Procedure, and that failure to appear may result in the request being continued to a future hearing date.

Applicant/Agent Name (Print): _____ **Date:** _____

Applicant/Agent Signature: _____

MADISON COUNTY, FLORIDA
Request for Property Zoning Change
229 SW Pinckney Street, Suite 219 • P.O. Box 539 •
Madison, Florida 32340
Phone (850) 973-6785 • madisoncountyfl.com

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File No. _____
Submission Date _____
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PART II — COMPANION APPLICATION FOR REZONING (OFFICIAL ZONING ATLAS AMENDMENT)

Complete this Part only if a corresponding amendment to the Official Zoning Atlas is requested concurrently with, or in conjunction with, the Comprehensive Plan Amendment requested in Part I. Because Madison County's zoning districts correspond directly to the Land Use Districts established in Chapter 4 of the Land Development Code, a change in Future Land Use designation will typically require a corresponding change in zoning to maintain consistency between the Future Land Use Map and the Official Zoning Atlas.

SECTION A. INSTRUCTIONS AND CHECKLIST

☐	Complete and sign this Part of the application.
☐	Copy of deed or current tax bill showing ownership (may be satisfied by Part I, Section 9, Item 7, if already submitted).
☐	Legal description of the proposed property (may be satisfied by Part I, Section 9, Item 6, if already submitted).
☐	Written consent of the property owner, if different from the Applicant.
☐	Names and addresses of property owners within 500 feet of the subject property (available through the Property Appraiser's Office; the Planning Department will assist in compiling this list).
☐	For requests made for economic development purposes, a letter stating the economic benefit of the requested land use change.
☐	Application Fee (non-refundable): $3687.00+consulting fees for parcels of ten (10) acres or more; $1844.00+consulting fees for parcels of less than ten (10) acres.

*** The application fee includes required certified notices to surrounding property owners. The Applicant will be invoiced for any additional required legal notices prior to the final transmittal of the amendment to the State.**

NOTE: Applications involving ten (10) acres or more require four (4) public hearings at the local level and two (2) state reviews prior to approval. State reviewing agencies are allowed thirty (30) days from receipt of the application packet to complete their review after approval by the Planning & Zoning Board and the Board of County Commissioners.

SECTION B. APPLICANT AND OWNER INFORMATION

☐ **Same as Part I, Section 4 (Applicant Information) – if checked, proceed to Section C.**

Applicant's Name: _____

Applicant's Phone Number: _____ **Applicant's Email:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Property Owner (if different from Applicant): _____

Phone Number (if different): _____ **Address (if different):** _____

Co-Owner (if applicable): _____

Phone Number (if different): _____ **Address (if different):** _____

SECTION C. PROPERTY AND ZONING INFORMATION

Legal Description (attach separate sheet if necessary): _____

_____

Parcel ID Number(s): _____ **Parcel Size (Acreage):** _____

Current Zoning District (check one):

☐ A-1 – Agriculture 1	☐ A-2 – Agriculture 2	☐ R-1 – Residential
☐ CO – Commercial	☐ HI – Highway Interchange	☐ MU – Mixed Use
☐ CP – Commerce Park	☐ I – Industrial	☐ P – Public
☐ C – Conservation	☐ REC – Recreation	☐ UDO – Urban Development Overlay

Proposed Zoning District (check one):

☐ A-1 – Agriculture 1	☐ A-2 – Agriculture 2	☐ R-1 – Residential
☐ CO – Commercial	☐ HI – Highway Interchange	☐ MU – Mixed Use
☐ CP – Commerce Park	☐ I – Industrial	☐ P – Public
☐ C – Conservation	☐ REC – Recreation	☐ UDO – Urban Development Overlay

SECTION D. EXPLANATION / REASON FOR REQUEST

_____

_____

_____

_____

SECTION E. STATUTORY DISCLAIMER

Pursuant to Section 125.022, Florida Statutes:

Issuance of a development permit or development order by Madison County does not in any way create any right on the part of the Applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the County for issuance of

the permit if the Applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law.

SECTION F. CERTIFICATION, SIGNATURES, AND NOTARIZATION

I/We certify, under penalty of perjury, that all information and materials submitted in this Part II are true and correct to the best of my/our knowledge and belief.

Property Owner Printed Name: _____

Property Owner Signature: _____ **Date:** _____

Agent Printed Name (if applicable): _____

Agent Signature (if applicable): _____ **Date:** _____

STATE OF FLORIDA
COUNTY OF MADISON

The foregoing instrument was 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.

Notary Public, State of Florida – Signature: _____

Print Name: _____ **Commission No.:** _____

My Commission Expires: _____

[Notary Seal]