

**PLANNING DEPARTMENT**

1600 Huntington Lane, Rockledge, FL 32955  
Phone: 321-221-7540 | Fax: 321-204-6354



**APPLICATION FOR ZONING DISTRICT AMENDMENT**

(Please type or print clearly in blue or black ink)

To be completed by City Staff:

Application No. ZDA-\_\_\_\_\_

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

**Section 1. APPLICANT / PROPERTY OWNER(S) / AGENT INFORMATION:**

Name of Property Owner(s) \_\_\_\_\_

Residence Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax No. \_\_\_\_\_

Email Address \_\_\_\_\_

Name of Agent, if any \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax No. \_\_\_\_\_

Email Address \_\_\_\_\_

**Section 2. PROPERTY INFORMATION:**

Physical Address of Property \_\_\_\_\_

or, if not available, provide a general location (Example: NW corner of "A" and "B" Streets)

\_\_\_\_\_

Legal Description of Property: Lot: \_\_\_\_\_ Block: \_\_\_\_\_ PB/PG: \_\_\_\_\_

Subdivision: \_\_\_\_\_

or TOWNSHIP: \_\_\_\_\_ RANGE: \_\_\_\_\_ SECTION: \_\_\_\_\_ PARCEL #: \_\_\_\_\_

Parcel ID No. (assigned by Brevard County): \_\_\_\_\_

**Section 3. CURRENT ZONING CLASSIFICATION:**

Identify the current Zoning Classification established by the City of Rockledge. If the current classification is established by Brevard County, identify that designation, along with any special classification with specified conditions or conditional use, and provide a Brevard County Zoning Map and copy of appropriate section of Brevard County Zoning Code.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 4. REQUESTED ZONING CLASSIFICATION (e.g. P1 Professional).**

\_\_\_\_\_

**Section 5. PLANNING DISTRICT AND LAND USE CATEGORY.**

Identify the Planning District in which this property is located and describe how this request is compatible with the land use shown on the Future Land Use Map (FLUM).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 6. SIGNATURES OF OWNERS AND/OR AGENTS:**

Sign Name (Property Owner): \_\_\_\_\_

Print Name (Property Owner): \_\_\_\_\_

Sign Name (Property Owner): \_\_\_\_\_

Print Name (Property Owner): \_\_\_\_\_

Sign Name (Agent): \_\_\_\_\_

Print Name (Agent): \_\_\_\_\_

**Section 7. ATTACHMENTS AND EXHIBITS.**

The following documents must be included when submitting the application package:

As to Section 1.

- A copy of the recorded deed or other legal instrument indicating proof of ownership
- If an agent is listed, a notarized letter or statement of authorization from the property owner(s) authorizing the agent to represent the owner(s) in connection with this application, OR a recorded Power of Attorney, Personal Representative Deed, Trustee Agreement, etc., in the agent's name.

As to Section 2.

- Legal description of the property. If described in metes and bounds, provide the description in hard copy and electronic format (Microsoft Word is preferred).
- Brevard County Property Appraiser's Map reflecting the boundaries of the subject property and indicating properties within a five hundred foot (500') radius of the subject property. The map must be scaled at 1"=200'.
  - A list of the names and addresses of all property owners within the 500' radius of the subject property. The list must correlate numerically with the map.
  - Mailing labels containing the names and addresses of those property owners within the 500' radius of the subject property, as in the previous item.

**NOTE: The Property Appraiser's Map, list of names and mailing labels are available at the Brevard County Planning & Development Department, Brevard County Government Complex, Building A.**

As to Application.

- Completed Development Fact Sheet provided with the Application Form
- A check in the amount of \$750.00 payable to the City of Rockledge. This amount represents the filing

fee.

**DEVELOPMENT FACT SHEET**

**APPLICANT / OWNER NAME:** \_\_\_\_\_

ZDA Application Number assigned by City Staff: \_\_\_\_\_

**Section 1. PROPERTY INFORMATION.**

Physical Address of Property \_\_\_\_\_

or, if not available, provide a general location (e.g., NW corner of "A" and "B" Streets)

\_\_\_\_\_  
\_\_\_\_\_

Size of Property in Acreage \_\_\_\_\_

**Section 2. REQUESTED ZONING CLASSIFICATION (e.g., P1 Professional)**

\_\_\_\_\_

**Section 3. CURRENT ZONING AND LAND USE DESIGNATIONS.**

**ZONING:**

**LAND USE (shown on Future Land Use Map**

Subject Site \_\_\_\_\_

Subject Site \_\_\_\_\_

North \_\_\_\_\_

North \_\_\_\_\_

South \_\_\_\_\_

South \_\_\_\_\_

East \_\_\_\_\_

East \_\_\_\_\_

West \_\_\_\_\_

West \_\_\_\_\_

**Section 4. NATURAL FEATURES.**

Soil \_\_\_\_\_

Topography \_\_\_\_\_

Vegetation \_\_\_\_\_

Flood Hazard \_\_\_\_\_

Drainage \_\_\_\_\_

**Section 5. ENVIRONMENTAL QUALITY.**

Water \_\_\_\_\_

Air \_\_\_\_\_

Noise \_\_\_\_\_

Historical/Archaeological \_\_\_\_\_

**Section 6. ATTACHMENTS/EXHIBITS TO DEVELOPMENT FACT SHEET.**

**To be determined by City Staff**

### NOTICES TO APPLICANT

- Your application will not be processed unless it is complete and all attachments and exhibits are included.
- Once it has been determined that your application is complete, processing will begin and the required public hearing(s) will be scheduled for the first available opportunity.
- Please be aware that you, as applicant, owner, agent, or as an interested party, are prohibited from contacting individually any of the members of the Planning Commission either by telephone, in person, or in writing (including electronic mail).
- You will have the opportunity to provide input in open forum during the scheduled public hearing(s).
- All public hearings are conducted in accordance with the State of Florida Open Meetings Laws / Government in the Sunshine.