City of Parker

1001 West Park Street
Parker, Florida 32404
Telephone: 850-871-4104 FAX 850-871-6684
Web site: parkercity.com E-mail coparker @knology.net

Application for Small Scale Comprehensive Plan Amendment

Small Scale (under 10 acres) $1,100.00

(plus hourly Attorney and Engineering Fees reimbursed as billed)

A. **Applicant Information** (Application to be completed by property owner or authorized agent only)

1. Owner's name: Tallahassee Estates North, LLC
2. Mailing address: 225 Land DR. Wewahitchka, Fl 32465
3. Telephone/Fax: 850-566-6754
4. Authorized agent name: BARRY Bostwick
5. Mailing address: 225 Land DR
   Wewahitchka, Fl 32465
6. Telephone/Fax: 850-566-6754

B. **Requested Amendment**

change from mixed use II to commercial.

C. **Property Information**

Address of site for which amendment is requested: 6300 E. Highway 98
Parker, Fl 32404

Attach three (3) surveys with the legal description on each survey.

Attach a copy of the deed or other instrument documenting legal interest.

Tax Role Information:

Parcel ID Number: 26202-000-000

Existing Tax Classification: mixed use II

Proposed Tax Classification Commercial

D. Site Information:

The following information must be provided along with this application:

1. The most recent aerial photograph available from the Property Appraiser's Office. The information required by 2.(a) through (g) may be shown on the aerial photo in lieu of the required site plan.

2. A site plan or drawing, drawn to a scale deemed acceptable by the Mayor, which describes or shows the following:

   a) Location in relation to surrounding physical features such as streets, railroads, water bodies, etc. Names of all adjacent streets and other physical features must be shown.

   b) North direction arrow.

   c) Township, Range and Section

   d) Existing designated use of the site and all adjacent properties, as shown on the Land Use Map.

   e) Dimensions of the site (length, width, etc.) in linear feet.

   f) Size of the site in square feet or acres.

   g) The type of development proposed for the site; the general location of such development of the site, and; the size (square feet) of the proposed development.

E. Justification

Explain the circumstances that give rise to the need for the amendment, including an explanation of why a similar piece of property already designated for the requested use would not be suitable.

Automobile Sales & Automobile Rentals not allowed in mixed use II.

F. **Facility Capacity Analysis**

Applicant must provide information as to how the site will have access to potable water, sewage disposal, roads, and storm water control.

1. Potable Water Source:
   Private water wells: ~~City of Parker~~ C

   Private community system provider:

   Public water system provider: City of Parker

2. Sewage Disposal Source:
   Private septic tanks:

   Private sewage system provider:

   Public sewage system provider: City of Parker

3. Storm water control:
   Describe how the storm water will be controlled and treated:

   Existing structure

G. **Certification and Authorization**

By my signature hereto, I do hereby certify that the information contained in this application is true and correct, and understand that deliberate misrepresentation of such information will be grounds for denial or reversal of this application and/or revocation of any approval based upon this application.

I do hereby authorize the City of Parker staff to enter upon my property at any reasonable time for the purposes of site inspection.

I do hereby authorize the placement of a public notice sign on my property at locations to be determined by City staff.

BARRY Bostwick
Applicant's Name (please print)

Barry Bostwick
Applicant's Signature

Tallahassee Estates North, LLC
Company Name

This application must be notarized.

Signed and sealed before me this 22nd day of November, 2023, by Barry Bostwick, who is personally known to me or who has produced Fl. Drivers License B232-062-63-442-0 as identification and who did/did not take an oath.

Donna Perdue
Notary Public

Donna Perdue
Print Name

My commission expires: _____

DONNA ILEEN PERDUE
MY COMMISSION EXPIRES
APRIL 19, 2025
#HH 073994
Bonded thru Notary Public Underwriters
NOTARY PUBLIC, STATE OF FLORIDA