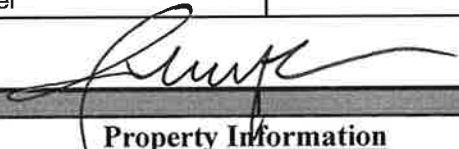


**APPLICATION FORM
REZONING REQUEST (RZON)
INDIAN RIVER COUNTY**

Each application must be complete when submitted and must include all required attachments. An incomplete application will not be processed and will be returned to the applicant.

Assigned Project Number: RZON - _____			
	Current Owner	Applicant (Contract Purchaser)	Agent
Name:	Mr. Jody Miller	same as owner	Mr. Steve Long
Complete Mailing Address:	30 Lost Beach Road, Vero Beach, FL 32963		347 Indiana Avenue, Venice, CA 90291
Phone #: (including area code)	716-440-0192		424-302-6815
Fax #: (including area code)			
E-Mail:	jlmwny@yahoo.com		steve@offthewallconsulting.co
Contact Person:	Mr. Jody Miller		Mr. Steve Long
Signature of Owner or Agent: 			
Property Information			
Site Address: 5145 US Highway 1			
Site Tax Parcel I.D. #s: 32-39-23-00000-3000-00016.0			
Subdivision Name, Unit Number, Block and Lot Number (if applicable)			
Existing Zoning District: IL		Existing Land Use Designation: C/I	
Requested Zoning District: CG			
Total (gross) Acreage of Parcel: 1.45		Acreage (net) to be Rezoned: 1.45	
Existing Use on Site: Vacant			
Proposed Use on Site: Recreational Sports Center			
THE APPLICANT MUST ATTEND A PRE-APPLICATION CONFERENCE WITH LONG-RANGE PLANNING SECTION STAFF PRIOR TO APPLYING IN ORDER TO RESOLVE OR AVOID PROBLEMS CONNECTED WITH THE REZONING REQUEST.			

REZONING APPLICATION CHECKLIST

Please attach the following items to this application. Do not ignore any of the items. Indicate "N/A" if an item is not applicable.

ITEMS	Applicant's Checklist	Staff Checklist
1. Fee: \$3,000.00	x	
2. Completed Rezoning Application Form (front page)	x	
3. Letter of Authorization from Current Owner(s) OR Current Owner is Applicant	x	
4. Verified statement (separate letter) naming every individual or entity having legal or equitable ownership in the property.	x	
5. One (1) Copy of the current Owner's Deed	x	
6. A Current Owner's Title Policy OR A Certificate of Title from a Title Company OR An attorney's written opinion evidencing fee ownership of the property.	x	
7. A justification of change statement and detailed intended use	x	
8. One (1) SEALED boundary survey of the area to be rezoned. The boundary survey shall include, but not be limited to the following: <input type="checkbox"/> a legal description of the land to be rezoned <input type="checkbox"/> the size of the land to be rezoned <input type="checkbox"/> the public road right-of-way width of adjacent roads; and <input type="checkbox"/> a north arrow	x	
9. Electronic version (MS Word is preferable) of the legal description	x	
10. Provide a digital map file of the boundary Survey provided in Item 8 above in either AutoCAD (.dwg) or Esri Shape file (.shp) format.	x	
11. Copy of Approved Concurrency Certificate OR Copy of filed application for Concurrency Certificate, including traffic study, if applicable	x	

NOTE: ITEMS 2-6 MUST INDICATE THE SAME OWNERSHIP OF THE SUBJECT PROPERTY.

Revised: September 19, 2022

**Indian River County
Future Land Use Map Amendment/Rezoning
Authorization Form**

TO: Planning Division
Indian River County
1801 27th Street
Vero Beach, FL 32960

FROM: Mr. Jody Miller
(Property Owner) 30 Lost Beach Road
Vero Beach, FL 32963

Property Tax I.D. #: 32-39-23-00000-3000-00016.0

Property Address: 5145 US Highway 1

The undersigned is hereby authorized Steve Long to act as agent and/or make application to Indian River County for the above referenced property for the following applications (please mark the appropriate box):

- ☐ Future Land Use Amendment
☒ Rezoning

Mr. Jody Miller
Owners Name (Print)

4/23/24
Date

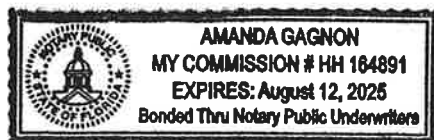
Owners Signature

**STATE OF FLORIDA
COUNTY OF INDIAN RIVER**

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 23 day of April, 2024 by Jody Miller.

Personally know ☒ OR produced identification ☐

(SEAL)



NOTARY PUBLIC:

Sign: Amanda Gagnon

Printed Name: Amanda Gagnon

Commission Number: HH 164891

Commission Expiration: August 12, 2025