


**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:	KENNEDY OSLO 27, LLC		Schulke, Bittle & Stoddard, LLC
Complete Mailing Address:	PO BOX 643850, VERO BEACH, FL 32964		1717 Indian River Blvd, Suite 201, Vero Beach, FL 32960
Phone #: (including area code)	(772)473-2521		772-770-9622
Fax #: (including area code)			772-770-9496
E-Mail:	tkennedy@proctorkennedy.com		gbarkett@sbsengineers.com
Contact Person:	Thomas "T.P." Kennedy		Geoffrey Barkett
Signature of Owner or Agent: 			
Property Information			
Site Address: 2805 9TH ST SW and 955 27TH AV SW, VERO BEACH, FL 32968			
Site Tax Parcel I.D. #s: 33392700001001000008.0 and 33392700001001000001.1			
Subdivision Name, Unit Number, Block and Lot Number (if applicable) N/A			
Existing Zoning District: CL		Existing Land Use Designation: C/I	
Requested Zoning District: CG			
Total (gross) Acreage of Parcel: 2.73		Acreage (net) to be Rezoned: 2.90	
Existing Use on Site: Vacant			
Proposed Use on Site: Commercial Subdivision			
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 checked="" type="checkbox"/> a legal description of the land to be rezoned <input checked="" type="checkbox"/> the size of the land to be rezoned <input checked="" type="checkbox"/> the public road right-of-way width of adjacent roads; and <input checked="" type="checkbox"/> a north arrow	X Approved preliminary plat Lot 1, 2 and 4	
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: KENNEDY OSLO 27, LLC
(Property Owner) _____

Property Tax I.D. #: 33392700001001000008.0 and 33392700001001000001.1

Property Address: 2805 9TH ST SW and 955 27TH AV SW, VERO BEACH, FL 32968

The undersigned is hereby authorized Schulke, Bittle & Stoddard, LLC 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

Thomas "T.P." Kennedy
Owners Name (Print)

7/10/2023
Date

[Signature]
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 10 day of July, 20 23 by Thomas Kennedy.

Personally know OR produced identification FL Drivers License

(SEAL)



LAUREN F. HAMILTON
Commission # HH 341002
Expires February 7, 2027

NOTARY PUBLIC:

Sign: [Signature]
Printed Name: Lauren F Hamilton
Commission Number: HH1341002
Commission Expiration: 7/7/2027