

150113E





APPLICATION—CITY PLAN BOARD—TEXT AMENDMENT PLANNING DIVISION Planning & Development Services

Tax Map No	EZ Fee: \$	110188
Account No. 001-660-668	80-1125 (Enterprise Zone Credit []	
Name of	Applicant/Agent (Please print or typ	e)
Applicant/Agent Name: (1:44 Pla	in Board	
Applicant/Agent Address:		
City:		
State:	Zip:	
Applicant/Agent Phone:	Applicant/Agent Fax:	
Gainesville Code of Ordinances (Land I Department of Community Development	tending to file a petition for a text amendn Development Code) or to the Comprehensi prior to filing the petition, in order to dis e evaluated as applicable to the particular	ve Plan, meet with the cuss the proposed amendment
	TEXT AMENDMENT	
Check applicable request below:		
Land Development Code []	Comprehensive Plan Text	Other []
Section/Appendix No.:	Element & Goal, Objective or Policy	Specify:

Proposed text language and/or explanation of reason for request (use additional sheets, if necessary):			
Amend the Comprehensive Plan Future Land Use			
Element Policy 4.3.5.			

Element Policy

4.3.5

Certified Cashiers Receipt:

Phone: 352-334-5022

150113E

Application—Text Amendment

TL—djw 8/99

No person submitting an application may rely upon any comment concerning a proposed amendment, or any expression of any nature about the proposal made by any participant at the pre-application conference as a representation or implication that the proposal will be ultimately approved or rejected in any form. CERTIFICATION
The undersigned has read the above application and is familiar with the information submitted herewith.
Signature of applicant/agent: Onelia Layre
Date:

Phone: 352-334-5022