



CITY OF GREEN COVE SPRINGS

321 Walnut Street
Green Cove Springs, FL 32043
(904) 297-7500 ext. 3317
(904) 284-4849 (fax)

APPLICATION FOR LOT SPLIT (Applicable for creating no more than 2 lots from 1 lot)

Date: _____ File #: _____ Filing Fee Receipt #: _____

1. Applicant Name: _____ Phone: _____

Address: _____ City/Zip: _____

Email Address: _____

2. Owner Name: _____ Phone: _____

Address: _____ City/Zip: _____

Email Address: _____

3. Property Address: _____

4. Legal Description: _____

5. Present use of Property: _____

6. Parcel #: _____

7. Zoning: _____ 8. Future Land Use Map Designation: _____

9. Character of proposed development: _____

10. Total area of site: _____

All attachments are required for a complete submittal.

I/We certify and acknowledge that the information contained herein is true and correct to the best of my/our knowledge.

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

State of _____ County of _____ The foregoing application is acknowledged

before me this _____ day of _____, 20____, by _____, who is/are personally

known to me, or who has/have produced _____ as identification.

NOTARY SEAL

Signature of Notary Public, State of _____

Required Attachments

The applicant shall submit the following:

- A completed application
 - Legal Description
 - Signed and sealed survey of Existing Property, including all structures, driveways,
 - Signed and sealed survey of Proposed Lot Split
 - Letter of Authorization, if not property owner
 - Warranty Deed or other documentation of ownership
 - Filing Fee \$125.00 plus a 10% administrative fee (\$137.50)
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