



GROWTH MANAGEMENT DEPARTMENT  
DEVELOPMENT SERVICES  
201 SE 3<sup>rd</sup> STREET (Second Floor), OCALA, FL 34471  
Phone: (352) 629-8404 Fax: (352) 629-8242  
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*City of Ocala*

**LAND USE AMENDMENT REQUEST  
SMALL SCALE  
(\$1,250)**

Due Date: First Monday of each month, 5 p.m., for the meeting on the second Monday of the following month.

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NOTE: The small scale amendment is for properties less than 10 acres in size.

1. Name of Petitioner(s): \_\_\_\_\_

Address of Petitioner(s): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Fax # \_\_\_\_\_ Email address \_\_\_\_\_

2. a. Parcel account number(s) [from tax roll]: \_\_\_\_\_

b. Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Size of Property \_\_\_\_\_

c. Legal Description: (Please attach)

NOTE: It shall be the applicant's responsibility to provide the correct legal description for the subject property. The application will not be processed until a correct legal description is provided. An electronic file of the legal description in Word format must be submitted with the application.

3. Street address of the property (if the property has no street address Development Services will complete this section):

\_\_\_\_\_  
\_\_\_\_\_

4. a. Present Land Use designation: \_\_\_\_\_

b. Present Zoning District: \_\_\_\_\_

c. Requested Land Use designation: \_\_\_\_\_

5. Description of the request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. The following items are required (The application will not be processed if these items do not accompany the application.):

- a. Deed or other proof of ownership
  - b. Notarized signature of the current property owner(s) & the agent's signature, if applicable
  - c. The appropriate fee in cash or check (Payable to the City of Ocala)
  - d. Electronic file of legal description in Word format
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I, \_\_\_\_\_, being first duly sworn, affirm and say that I am the owner of the property described above.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Address (Street)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City, State, Zip Code

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_\_,  
by \_\_\_\_\_, who is personally known to me or has produced  
\_\_\_\_\_ as identification and who did / did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC

Commission No.: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

I, \_\_\_\_\_, am the legal representative of the owner and I am authorized to speak in his/her behalf for the subject matter.

\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
Address (Street)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email Address

**ATTENDANCE** at the public hearing by the applicant  
or agent (as designated in writing) **IS MANDATORY**

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**STAFF USE ONLY:**

a. Date received: \_\_\_\_\_

b. Petition contains all required information:                    Y     N

c. Petition is consistent with the zoning code:                    Y     N

d. Petition is consistent with the comprehensive plan:            Y     N

e. Site lies within an historic district:                                Y     N

    If yes, what district: \_\_\_\_\_

f. Petition rejected:    Y     N     (see attached reason)

g. Petition accepted:    Y     N     Case #: \_\_\_\_\_

h. Land use:    Case #: \_\_\_\_\_