



APPLICATION FOR A CONDITIONAL USE

Official Use Only

Zoning District: _____
FLUM Designation: _____
Commission District: _____
Application #: _____
Date Filed: _____

35- 2N 28 1401 0004 0000

Parcel Identification Number (18 digit number)

Driving Instructions: From Lowes in Fernandina turn right onto SR 200/A1A East and tu
Turn right onto Hendricks Rd, Left onto Dwight Dr then left on Karen Walk.

1. Legal Description: Lot Pt 4 Block 3 Subdivision Mobely Heights North
Plat Book 6 Page 39
(Please attach a legal description if not located in a subdivision)

2. Location: On the East side of Karen Walk
(north, south, east, west) (street)

between Leo Drive (to the north) and Aloha Lane (to the south).
(street) (street)

Nearest identifiable landmark (for example: Walmart or I-95) Lowes Fernandina

3. Name and Address of the Owner as shown in the public records of Nassau County:

Abigail McManus & Bret Griffin
Arbor Lane
Fernandina Beach, FL 32034

Name and Address of the Applicant / Authorized Agent:

Karen Prescott/Century 21
500 Centre St
Fernandina Beach, FL 32034

* Please send
invoice to:
MR. CLINT Saenz
Carbajal
1(912) 322-0990
clintsaenz@gmail.com

(PLEASE NOTE: If applicant is not the owner, this application must be accompanied by completed Owner's
Authorization for Agent form.)

4. Detailed Description of Conditional Use Sought:

To get approval to build a duplex on the 1 acre property listed above.

5. Required Attachments:

Exhibit "A" - Survey

Exhibit "B" - Site Plan

Exhibit "C" - Interior Floor Plan, drawn to scale

Exhibit "D" - Other (please list)

6. Section of Zoning Code or provision that authorizes the granting of this Conditional Use: _____

7. For HOME OCCUPATIONS Only Section 28.14 (A), (1-8):

The following conditions will apply if the Conditional Use is granted. On a separate sheet of paper (8 1/2" x 11"), please address the following in detail and attach as Exhibit "E".

1. No person other than members of the family residing on the premises will be engaged in such occupation.
2. The use of the premises for the home occupation shall be clearly incidental and subordinate to its use for residential purpose and shall under no circumstances change the residential character thereof.
3. There shall be no change in the outside appearance of the building or premises, or other visible evidence of the conduct of such home occupation, except that one sign may be permitted, not exceeding one square foot in area, non-illuminated, mounted flat against the wall of the principal building at a position not more than two feet distance from the main entrance to the residence.
4. No traffic shall be generated by such home occupation in greater volumes than would normally be expected in a residence neighborhood.
5. No equipment or process shall be used in such home occupation that creates noise, vibrations, glare, fumes, odors, or electrical interference detectable to the normal sense off the lot. In the case of electrical interference, no equipment or process shall be used which creates visual or audible interference in any radio or television receivers off the premises, or causes fluctuations in line voltage off the premises.
6. The giving of art, piano or other instruction or lessons shall be limited to not more than four (4) persons at the same time.
7. Fabrication of articles such as are commonly classified under the terms arts and handicrafts may be deemed a home occupation and can be sold on the premises.
8. All goods and services offered for sale in conjunction with a home occupation shall be produced on the premises, and a member of the immediate family on the premises shall perform all services.

8. Has any application been submitted within the last two (2) years for a Zoning Exception, Conditional Use, Zoning Variance or for the Rezoning of any portion of the subject property included in this application?

No

If so, give details of such application and final disposition.

N/A

9. Is this parcel subject to deed restrictions enforced by a homeowners association? No

If so, please provide an address and contact name.

N/A

10. Applicant must address the Conditional Use Review Criteria on page 4.

In filing this application for a Conditional Use, the undersigned understands it becomes a part of the official records of the Conditional Use and Variance Board and does hereby certify that all information contained herein is true to the best of his/her knowledge.

Signature of Owner: _____

Signature of Applicant: Karen Prescott

(if different than Owner)

Signature of Agent: Karen Prescott

(if different than Owner)

Owner's mailing address: Karen Prescott/Century 21

500 Centre St, Fernandina Beach, FL 32034

Telephone: 904-708-3399

Email: karenprescottC21@gmail.com

*Agent auth
form att'd

NOTE: If prepared or signed by an agent, a notarized *Owner's Authorization for Agent* form must be provided.

Newspaper for legal advertisement (OFFICIAL USE ONLY):

Fernandina Beach News Leader: _____

Nassau County Record _____

Conditional Use Review Criteria (Section 5.04):

Please answer the following questions as completely as possible and attach additional sheets (using 8½" x 11" size paper) with the answers typed or printed legibly and identifying the question.

- A. Will the establishment, maintenance or operation of the conditional use be detrimental to or endanger the public health, safety or general welfare? In addition, show that the conditional use will not be contrary to the established standards, regulations, or ordinances of other governmental agencies. **NO. It will be a duplex.**
- B. Will each structure or improvement be designed and constructed so that it is not unsightly, undesirable or obnoxious in appearance to the extent that it will hinder the orderly and harmonious development of Nassau County and the zoning district in which it is proposed? **YES.**
- C. Will the conditional use adversely impact the permitted uses in the zoning district or unduly restrict the enjoyment of other property in the immediate vicinity or substantially diminish or impair property values within the area? **NO.**
- D. Will the establishment of the conditional use impede the orderly development and improvement of the surrounding property for uses permitted in the zoning district? **NO. It will enhance the area w/ a New Home.**
- E. Will adequate water supply and sewage disposal facilities be provided in accordance with state and health requirements? **YES. Well + septic will be included.**
- F. Will adequate access roads, on-site parking, on-site loading areas and drainage be provided where required? **YES. a culvert + driveway will be used.**
- G. Will adequate measures be taken to provide ingress and egress to the property that is designed in a manner to minimize traffic congestion on local streets? **YES.**
- H. Will adequate screening and buffering of the conditional use be provided, if needed? **NOT NEEDED. A New Home.**
- I. Will the conditional use require signs or exterior lighting which will cause glare, adversely impact area traffic safety or have a negative economic effect on the area? Will any signs or exterior lighting required by the conditional use be compatible with development in the zoning district? **NO.**
- J. Will the conditional use conform to all applicable regulations of the zoning district in which it is proposed? **YES. It will be inspected by Bldg dept.**
- K. Will the conditional use conform to all applicable regulations listed in the adopted comprehensive plan? **YES. It is ZONED OR which allows for (Low Density) 2 residences.**

Certificate

I Abigail McManus & Bret Griffin, (signer's name), Owners (title) of
Karen Walk property 35-2N-28-1401-0004-0000 (company or LLC) an entity lawfully organized and existing
under the laws of N/A (name of State) do hereby affirm or swear that I am empowered and
authorized, on behalf of the entity, to execute this Agent Authorization form, and all documents required by Nassau
County regarding this application, and further expressly warrants that Karen Prescott has been given
and has received and accepted authority to sign and execute the documents on behalf of
Abigail McManus & Bret Griffin.

Abigail sign [Signature]
Signature

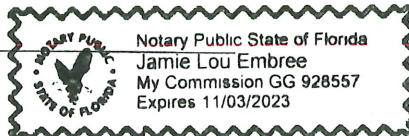
Bret Sign [Signature]
Title kp

State of Florida
County of Nassau

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online
notarization, this 2nd day of June, 2021 by Jamie Embree
for _____.

Personally Known [Signature] OR Produced _____ as identification.

[Signature]
Notary Signature



My Commission expires: 11/03/2023

~~A copy of the by-laws are attached hereto.~~ kp

[Signature]
Initials

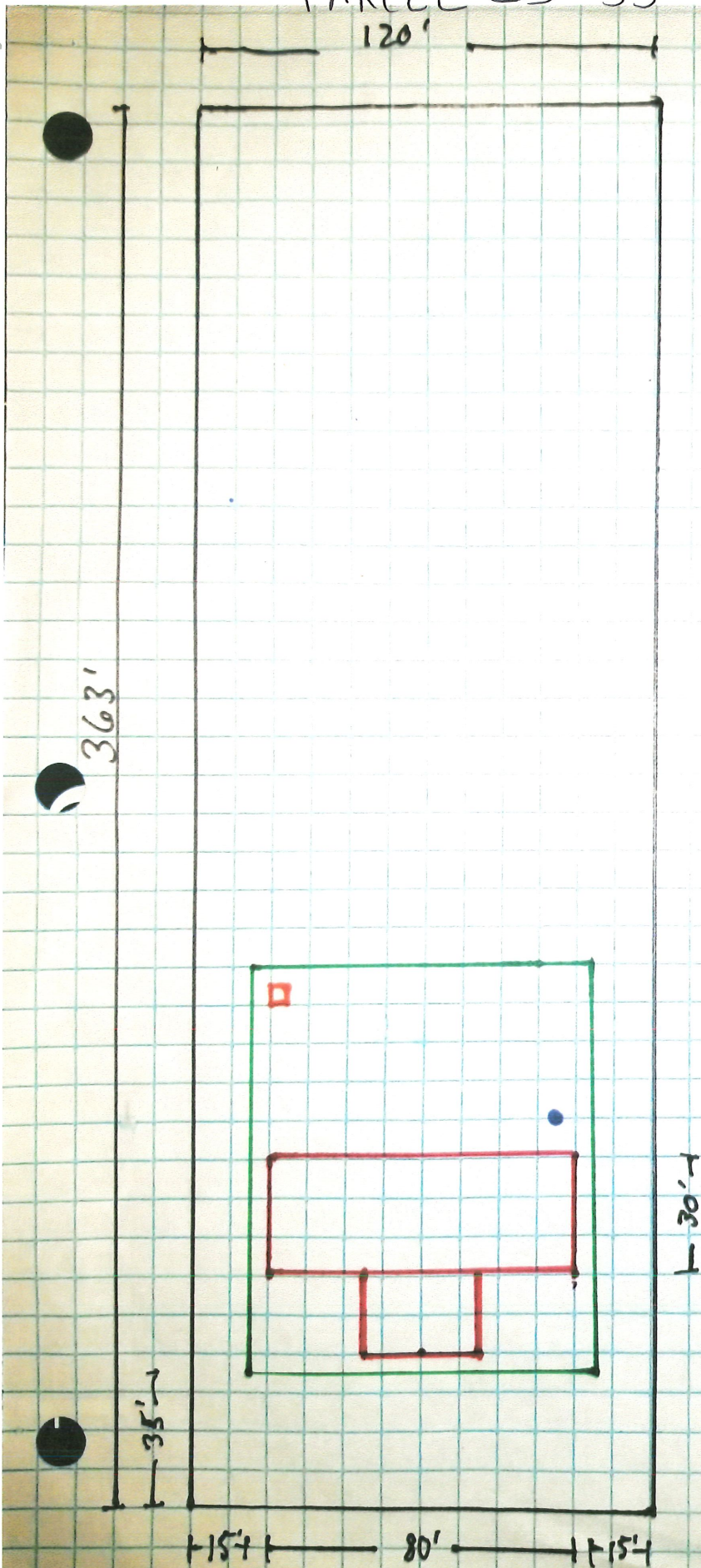
B.E.G
Initials

PARCEL ID 35-2N-28-1401-0004-0000

Karen Waack
Fernandina, FL

Legend

- 10 x 10
- Set Back
- Duplex
- Septic
- Well



Agent:

Karen Ruscott
(904) 708-3399