



St. Johns County
Growth Management Department
4040 Lewis Speedway
St. Augustine, FL 32084
(904)209-0609

Modification Application

Date:

This application, together with ALL REQUIRED EXHIBITS and application fee, should be completed and filed with the Growth Management Department. An Initial Determination is required prior to application.

Owner

Phone Number

(or Owner representing group of owners)

Fax Number

Address

e-mail

City State Zip Code

Agent

Phone Number

Address

Fax Number

City State Zip Code

e-mail

Project Location

Property Tax ID No

Statement of Reasons for the Request:

Provide File Number or other reference for Agreement being modified:

Brief Description of Proposed Modification:

I HEREBY CERTIFY THAT ALL INFORMATION IS PROVIDED HEREIN IS CORRECT TO THE BEST OF OUR KNOWLEDGE:

Signature of all owners or person authorized to represent this application:

Signed By _____

Printed or typed name(s)

Person to receive all correspondence regarding this application:

Name

Phone Number

Address

Fax Number

City State Zip Code

e-mail