

**APPLICATION FOR COMPREHENSIVE PLAN
TEXT AMENDMENT**

*INCLUDING CHANGES TO MAPS OTHER THAN FUTURE LAND USE MAP DESIGNATION
(separate application required for each text amendment)*

APPLICANT

Name: Tallahassee-Leon County Planning Department

Address: 435 N. Macomb St.
Tallahassee, FL 32301

Telephone: (850) 891-8600

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TALLAHASSEE/LEON COUNTY
PLANNING DEPARTMENT

Text Amendment- A pre-application conference with the TLCPD staff is recommended.

Element & Plan Page Number: Land Use Element, p. I-38

Goal/Objective/Policy Number: Policy 2.2.16

Other (specify): _____

1. Existing plan wording that is proposed for change: _____
Policy 2.2.16

2. Requested plan rewording/addition/deletion (*must be specific*): _____
(see attached)

3. Statement of the problem that is to be addressed by the requested amendment (*documentation of need*): clarification of airport uses in Government Operational future land use category

4. Analysis of the community wide impacts of the request on:

- Density/Intensity
- Transportation
- Environment
- Public School System
- Utilities
- Delivery of public services
- City/County Budget
- _____

5. Statement of the positive effects of this request on the community: _____
Government Operational category more accurately describes functions of a commercial airport
(Additional attachments may be provided at applicant's discretion)

Amendments to Maps (other than Future Land Use Map Designation changes) A pre-application conference with TLCPD is recommended.

1. Map to be Amended: _____

2. Amendment Requested (describe clearly and/or attach revised map): _____

3. Reason for Amendment: _____

4. See 4 above

Pre-Application Staff: (Signature)
Initials/Date

Received By The Tallahassee-Leon County Planning Department
on the 28 day of October, 2009

Applicants' signature below certifies that the applicant understands that the Future Land Use Map Amendments may require a rezoning, environmental analysis and other permit approvals before development activity can begin. Call the Land Use Administration Division of the Planning Department at 850-891-8600 for information on the rezoning process.

(Signature)
Staff Signature

Signature of Property Owner or Agent Date

Policy 2.2.16: [L]

GOVERNMENT OPERATIONAL (*Effective 8/17/9; Rev. Effective 7/26/06; Renumbered 3/14/07*)

Contains fFacilities, which include those defined on the Land Use Development Matrix as Community Services, Light Infrastructure, Heavy Infrastructure, and Post Secondary, which-that provide for the operation of and provision of services on property owned or operated by local, state and federal government. The government facilities may include services and uses provided by private entities operating on property owned by the local, state, or federal government. These facilities shall include, but are not limited to:

Airports*	_____	Offices
Correctional Facilities	_____	Outdoor Storage Facilities
Courts	_____	Police/Fire Stations
Electric Generating Facilities	_____	Sanitary Sewer Percolation Ponds
Electric Sub-Stations	_____	Sanitary Sewer Pump Stations
Health Clinics	_____	Sanitary Sewer Sprayfields
Libraries	_____	Vehicle Maintenance Facilities
Incinerators	_____	Waste to Energy
Materials Recovery Facilities	_____	Water Tanks
Museums	_____	Water Treatment Plants
Postal Facilities	_____	Water Wells

*Includes services and uses provided by private entities that are commonly located at commercial service airports.