

**Right-Of-Way Vacating
Application**

City of Tampa
Land Development Coordination
2555 East Hanna Ave.
Tampa, FL 33610
(813) 274-3100
(813) 259-1712 fax



EXHIBIT A

OFFICE USE ONLY:

Application Number: VAC-25-0000008
Date Rec'd: February 21, 2025 Atlas Page: I-12
Tentative PH Date 11/13/2025

APPLICANT'S INFORMATION

Name(s): Hp Puffy Llc
Address: 1801 S Australian Ave
City: West Palm Beach State: FL Zip Code: 33409-6465
Phone Number: _____ Fax Number: _____
Email Address: landuse@gardnerbrewer.com

For multiple applicants attach additional signature sheet for each additional applicant

REASON FOR REQUEST TO VACATE RIGHT-OF-WAY

Eastern portion of alley has been previously vacated. The remainder to be vacated will be included as part of a proposed redevelopment. All abutting property owners are applicants on the request.

Recital: The applicant(s) herein named hereby waive, renounce, relinquish, absolve and discharge the city from any claim for damages of any nature and kind whatsoever that such applicant(s) may have or claim or demand, now or in the future, by reason of the vacating, closing, discontinuing and abandoning of the public street, road, alleyway, place or highway or any part or portion thereof.

PLEASE COMPLETE IF APPLICABLE

I, APPLICANT HEREBY DIRECT THAT ALL OFFICIAL CORRESPONDENCE BE SENT TO:

Name(s): Addie Clark
Address: 400 N Ashley Drive, Ste. 1100
City: Tampa State: FL Zip Code: 33602
Phone Number: _____ Fax Number: _____
Email Address: landuse@gardnerbrewer.com

ATTACHMENTS

1. List of owner's names and addresses and the legal description of all abutting property, as reflected by the latest ad valorem tax records.
2. Drawing or blueprint of the subdivision in which the right-of-way requested to be vacated is located.

Please check the Plat, Survey, Title Policy and all other documentation relating to your property prior to design and construction. The City of Tampa and its staff **DO NOT** review for compliance with individual private deed restrictions and covenants during permit review. The issuance of a building permit by the City of Tampa signifies that the project is in compliance with the zoning codes of the City of Tampa and City of Tampa and Florida building code. The issuance of a building permit **DOES NOT** insure compliance with private deed restrictions or covenants.

**Right-Of-Way Vacating
Application**

City of Tampa
Land Development Coordination
2555 East Hanna Ave.
Tampa, FL 33610
(813) 274-3100
(813) 259-1712 fax



EXHIBIT A-1

OFFICE USE ONLY:

Application Number: VAC-25-0000008
Vacating Area (sq. feet): 3,072.00
No. of Signs issued: 2 Date Issued: _____
City Council District _____
Overlay District _____
Local Historic District _____ 50.48

LEGAL DESCRIPTION OF RIGHT-OF-WAY TO BE VACATED:

MUST BE TYPED: (use separate sheet if needed)

See attached legal description and sketch.

VICINITY:

(Surrounding Rights-of-Way; Or general Location)

SKETCH OF DESCRIPTION

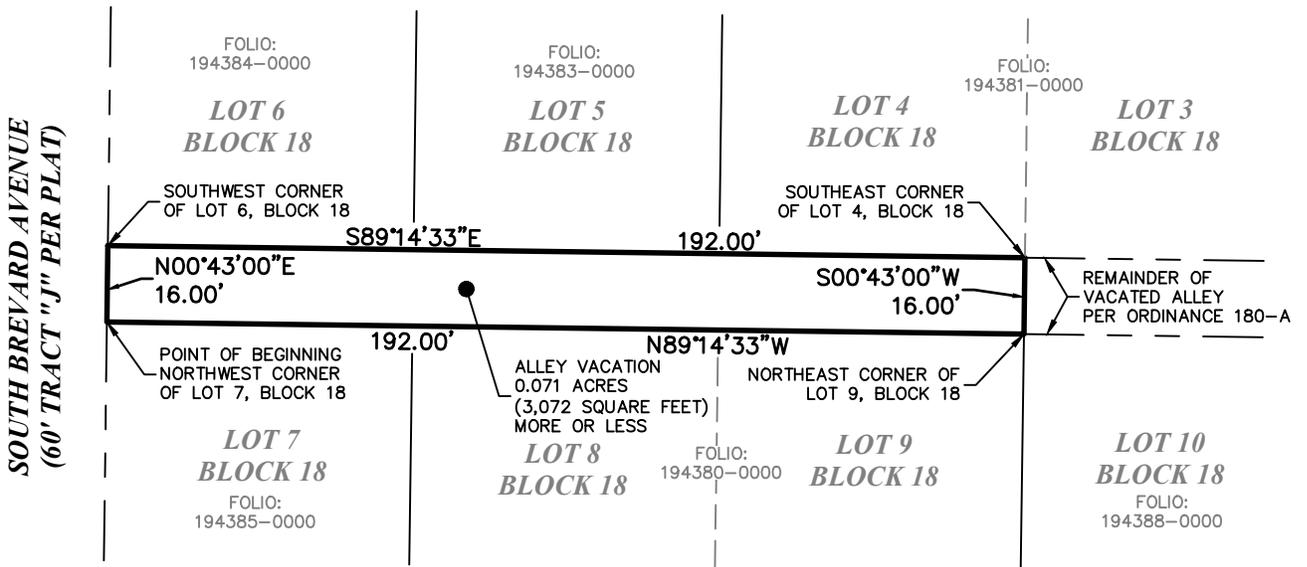
(NOT A BOUNDARY SURVEY)

LEGAL DESCRIPTION:

THAT PART OF THE ALLEY LOCATED WITHIN BLOCK 18, REVISED MAP OF PACKWOODS SUBDIVISION, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 1, PAGE 60, OF THE PUBLIC RECORDS OF HILLSBOROUGH COUNTY, FLORIDA, LYING BETWEEN LOTS 4, 5, 6, 7, 8, AND 9, BLOCK 18, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

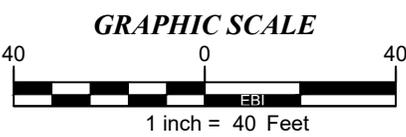
BEGINNING AT A NORTHWEST CORNER OF SAID LOT 7; THENCE N.00°43'00"E., A DISTANCE OF 16.00 FEET TO A SOUTHWEST CORNER OF SAID LOT 6; THENCE S.89°14'33"E., A DISTANCE OF 192.00 FEET TO A SOUTHEAST CORNER OF SAID LOT 4; THENCE S.00°43'00"W., A DISTANCE OF 16.00 FEET TO A NORTHEAST CORNER OF SAID LOT 9; THENCE N.89°14'33"W., A DISTANCE OF 192.00 FEET TO THE POINT OF BEGINNING.

CONTAINING 3,072 SQUARE FEET OR 0.0705 ACRES, MORE OR LESS.



LEGEND	
ABBREVIATIONS	
ID	IDENTIFICATION
LB	LICENSED BUSINESS NUMBER
LS	LICENSED SURVEYOR
ORB	OFFICIAL RECORDS BOOK
(P)	PER PLAT
PSM	PROFESSIONAL SURVEYOR AND MAPPER
R/W	RIGHT-OF-WAY

BEARING BASIS:
 BEARINGS SHOWN HEREON ARE BASED ON STATE PLANE COORDINATES, NORTH AMERICAN DATUM 1983, ADJUSTMENT OF 2011, FLORIDA WEST ZONE.



SHEET NO.
1
 OF 1

EBI Surveying
 1304 West Fletcher Avenue
 Tampa, Florida 33612

Phone: (813) 886-6080 / Fax: (813) 886-6081
 Certificate of Authorization Number: LB-7652

SURVEY REPORT:
 1. UNLESS DIGITALLY SIGNED AND SEALED, THIS SKETCH OF DESCRIPTION AND/OR REPORT OR THE COPIES HEREOF ARE NOT VALID WITHOUT THE ORIGINAL SIGNATURE AND SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER. ADDITIONS OR DELETIONS TO SURVEY MAPS OR REPORTS BY OTHER THAN THE SIGNING PARTY OR PARTIES ARE PROHIBITED WITHOUT WRITTEN CONSENT OF THE SIGNING PARTY OR PARTIES.

I HEREBY CERTIFY THAT THIS SKETCH OF DESCRIPTION WAS MADE UNDER MY DIRECTION AND MEETS THE STANDARDS OF PRACTICE REQUIREMENTS OF CHAPTER 5J-17 OF THE FLORIDA ADMINISTRATIVE CODE.

DATE: 2/13/2025
DRAWN: EWB
CHECKED: TPS
REVISION:
FILE: GR01VacateSODX.dwg

SKETCH OF DESCRIPTION
ALLEY VACATION
BLOCK 18
REVISED MAP OF PACKWOODS
HILLSBOROUGH COUNTY, FLORIDA

THOMAS PATRICK SERBU
 PROFESSIONAL SURVEYOR AND MAPPER
 FLORIDA REGISTRATION NUMBER LS-4744
 EMAIL: thomas@ebisurvey.com
 DATE SIGNED: 2/13/25

PROJECT NUMBER:
GRTR0001

**Right-Of-Way Vacating
Application**

City of Tampa
Land Development Coordination
2555 East Hanna Ave.
Tampa, FL 33610
(813) 274-3100
(813) 259-1712 fax



Application Number:

VAC-25-0000008

EXHIBIT B

ABUTTING PROPERTY OWNERS LIST:

MUST BE TYPED: (use separate sheet if needed)

Folio Number	Property Owner	Mailing Address	Mailing City, State, Zip	<u>Legal Description</u>

Right-Of-Way Vacating Application



Application Number: _____

City of Tampa
Land Development Coordination
2555 E Hanna Avenue
Tampa, FL 33610
(813)274-3100
(813)259-1799 fax

EXHIBIT C

Parcel Address Used (List all):

PARTICIPATING ORGANIZATION(S) TO BE NOTIFIED ATTACH ADDITIONAL SHEET IF NEEDED

****Participating Organization Names per https://apps.tampagov.net/Zoning_Notice_WebApp/
Applicant's Responsibility to obtain and provide****

Contact Name:	Organization Name:	Mailing Address:

SEE ATTACHED LIST

I, THE UNDERSIGNED APPLICANT/AGENT, HEREBY CERTIFY THAT ALL INFORMATION HEREIN IS TRUE AND COMPLETE.

Signature (applicant): _____ Print Name: (applicant): _____

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE FOREGOING INSTRUMENT was acknowledged before me by means of physical presence or online notarization, this _____ day of _____, 202_ by _____, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

Signature of Notary
Name: _____
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires:

Right-Of-Way Vacating Application



Application Number: VAC-25-XX

City of Tampa
Land Development Coordination
2555 E Hanna Avenue
Tampa, FL 33610
(813)274-3100
(813)259-1799 fax

AFFIDAVIT TO AUTHORIZE AGENT

State of Florida
County of Hillsborough
City of Tampa

I, We, being of legal age, first duly sworn, depose(s) and say(s):

1. That (I am / we are) the owner(s) (hereinafter "Owner") and record title holder(s) of the following described property (provide address or general location):

613 S Magnolia Avenue and 612 W Bay Street, Tampa

2. That the property, described as follows, constitutes the property for which a application for vacation is submitted (provide general location or legal description):

See attached legal description

3. That the undersigned does hereby appoint the following agent(s) stated herein as his(their) agent(s) to execute any application(s) or other documentation necessary to affect such vacation application:

Name: T. Truett Gardner and Gardner Brewer Hudson, P.A. / Stephen Michelini
Address: 400 N Ashley Drive, Suite 1100 Tampa, FL 33602 Phone: 813-221-9600
Fax: _____ Email: landuse@gardnerbrewer.com

4. That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above referenced application to vacate right-of-way.

5. That (I / we), the undersigned authority, hereby certify that the foregoing is true and correct.

Property Owner -Signature

ROBERT SCHLESINGER

Print Name

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE FOREGOING INSTRUMENT was acknowledged before me by means of physical presence or online notarization, this 4 day of FEBRUARY, 2025, by ROBERT SCHLESINGER, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

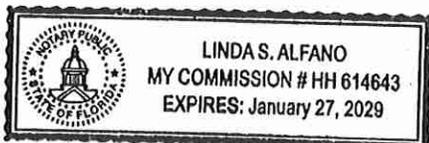
Linda S. Alfano
Signature of Notary

Name: LINDA S. ALFANO

(Print or Type Name)

Notary Public: State of Florida

My Commission Expires:



Right-Of-Way Vacating Application

City of Tampa
Land Development Coordination
2555 E Hanna Avenue
Tampa, FL 33610
(813)274-3100
(813)259-1799 fax



Application Number: VAC-25-XX

AFFIDAVIT TO AUTHORIZE AGENT

State of Florida
County of Hillsborough
City of Tampa

I, We, being of legal age, first duly sworn, depose(s) and say(s):

1. That (I am / we are) the owner(s) (hereinafter "Owner") and record title holder(s) of the following described property (provide address or general location):

611 S Magnolia Avenue, Tampa

2. That the property, described as follows, constitutes the property for which a application for vacation is submitted (provide general location or legal description):

See attached legal description.

3. That the undersigned does hereby appoint the following agent(s) stated herein as his(their) agent(s) to execute any application(s) or other documentation necessary to affect such vacation application:

Name: T. Truett Gardner and Gardner Brewer Hudson, P.A. / Stephen Michelini
Address: 400 N Ashley Drive, Suite 1100 Tampa, FL 33602 Phone: 813-221-9600
Fax: _____ Email: landuse@gardnerbrewer.com

4. That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above referenced application to vacate right-of-way.

5. That (I / we), the undersigned authority, hereby certify that the foregoing is true and correct.

Property Owner -Signature

Print Name

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

4 THE FOREGOING INSTRUMENT was acknowledged before me by means of physical presence or online notarization, this 4 day of FEBRUARY, 2025 by ADAM SCHLESINGER, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

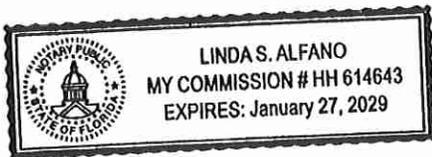
Signature of Notary

Name: LINDA S. ALFANO

(Print or Type Name)

Notary Public: State of Florida

My Commission Expires:



Right-Of-Way Vacating Application



Application Number: _____

City of Tampa
Land Development Coordination
2555 E Hanna Avenue
Tampa, FL 33610
(813)274-3100
(813)259-1799 fax

AFFIDAVIT TO AUTHORIZE AGENT

State of Florida
County of Hillsborough
City of Tampa

I, We, being of legal age, first duly sworn, depose(s) and say(s):

1. That (I am / we are) the owner(s) (hereinafter "Owner") and record title holder(s) of the following described property (provide address or general location):

614 W Bay St, Tampa

2. That the property, described as follows, constitutes the property for which a application for vacation is submitted (provide general location or legal description):

See attached legal description.

3. That the undersigned does hereby appoint the following agent(s) stated herein as his(their) agent(s) to execute any application(s) or other documentation necessary to affect such vacation application:

Name: T. Truett Gardner and Gardner Brewer Hudson, P.A. / Stephen Michelini
Address: 400 N Ashley Drive, Suite 1100 Tampa, FL 33602 Phone: 813-221-9600
Fax: _____ Email: landuse@gardnerbrewer.com

4. That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above referenced application to vacate right-of-way.

5. That (I / we), the undersigned authority, hereby certify that the foregoing is true and correct.

614 W. BAY STREET, LLC


By: Campbell Burton, its Manager
Property Owner -Signature

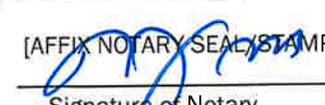

Print Name Manager

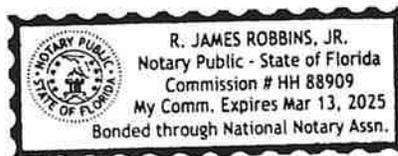
ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE FOREGOING INSTRUMENT was acknowledged before me by means of physical presence or online notarization, this 14th day of February, 2025 by Campbell Burton, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]


Signature of Notary
Name: R. James Robbins, Jr.
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires:



Right-Of-Way Vacating Application



Application Number: VAC-25-XX

City of Tampa
Land Development Coordination
2555 E Hanna Avenue
Tampa, FL 33610
(813)274-3100
(813)259-1799 fax

AFFIDAVIT TO AUTHORIZE AGENT

State of Florida
County of Hillsborough
City of Tampa

I, We, being of legal age, first duly sworn, depose(s) and say(s):

1. That (I am / we are) the owner(s) (hereinafter "Owner") and record title holder(s) of the following described property (provide address or general location):

611 W Swann Avenue, Tampa

2. That the property, described as follows, constitutes the property for which a application for vacation is submitted (provide general location or legal description):

See attached legal description

3. That the undersigned does hereby appoint the following agent(s) stated herein as his(their) agent(s) to execute any application(s) or other documentation necessary to affect such vacation application:

Name: T. Truett Gardner and Gardner Brewer Hudson, P.A. / Stephen Michelini
Address: 400 N Ashley Drive, Suite 1100 Tampa, FL 33602 Phone: 813-221-9600
Fax: _____ Email: landuse@gardnerbrewer.com

4. That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above referenced application to vacate right-of-way.

5. That (I / we), the undersigned authority, hereby certify that the foregoing is true and correct.

611 W SWANN AVENUE, LLC

Campbell Burton
By: Campbell Burton, its Manager
Property Owner -Signature

Campbell Burton
Print Name manager

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE FOREGOING INSTRUMENT was acknowledged before me by means of physical presence or online notarization, this 14th day of February, 2025 by Campbell Burton, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

R. James Robbins, Jr.
Signature of Notary
Name: R. James Robbins, Jr.
(Print or Type Name)
Notary Public: State of Florida
My Commission Expires:

