HERNANDO COUNTY CONDITIONAL USE PERMIT OR SPECIAL EXCEPTION USE PERMIT PETITION



Date: 2/3/2025

CUP - SPEX Application Form_11-08-16.Docx

Application request (check one):

- ☐ Conditional Use Permit
- ☑ Special Exception Use Permit

PRINT OR TYPE ALL INFORMATION

File No. SE-25-(Official Date Stamp:

RECEIVED

JUL 0 1 2025

Hernando County Development Services Zoning Division

APPLICANT NAME: David L. Merritt and Lynette M. Mer	rritt, as Trustees		
Address: 230 May Avenue			
City: Brooksville	State: FL	Zip: 34601	
Property owner's name: (if not the applicant)			
REPRESENTATIVE/CONTACT NAME: David L. Merritt			
Company Name: Darryl W. Johnston and Johnston La		#*************************************	
Address: 29 S. Brooksville Avenue	in Group, F.A.		
City: Brooksville	State: FL	Zin: 34601	
Phone: 352-796-5124 Email: dwi@diohnston	nlaw.com		
HOME OWNERS ASSOCIATION: ☐ Yes ☑ No (if applicable	e provide name)		
Contact Name:			
Address:	City:Sta	ite: Zip:	
PROPERTY INFORMATION:			
200025 1200407			
1. PARCEL(S) <u>KEY</u> NUMBER(S): 300035 and 300197 2. SECTION 20 , TOWNSHIP:	22 PANCE 26	1	
3. Current zoning classification:	, RANGE 20	, RANGE <u>20</u>	
Desired use: Limited At-Home Business			
5. Size of area covered by application: 4.9 Acres and 3.4 A	Acres		
6. Highway and street boundaries: Weatherly Road			
7. Has a public hearing been held on this property within the	past twelve months? Yes No		
8 Will expert witness(es) be utilized during the public hearin		s, identify on an attached list.	
Will additional time be required during the public hearing(needed:)	
	a) and now mach. D 163 D 110 (Time	necucu.	
PROPERTY OWNER AFFIDIVAT			
David L Marritt and Lunnatta M Marritt as Trustees			
I, David L. Merritt and Lynnette M. Merritt, as Trustees	, have thoroughly examined the	instructions for filing this	
application and state and affirm that all information submitted wi belief and are a matter of public record, and that (check one):	thin this petition are true and correct to the	best of my knowledge and	
	· OB		
I am the owner of the property and am making this applica			
I am the owner of the property and am authorizing (applican			
and (representative, if applicable): Darryl W. Johnston with Jo	innston Caw Group, P.A.		
to submit an application for the described property.	(// Sn. D)		
	Frenette MAN		
ϵ	Signature of Property Owner	us -	
STATE OF FLORIDA	Signature by Property Owner		
COUNTY OF HERNANDO		2.5	
The foregoing instrument was acknowledged before me this $\frac{\partial}{\partial t}$	Meday of JUNE	, 20 25, by	
hynette M. Merritt who is pers	sonally known to me or produced		
P EN 1 H Para			
Regay Clyateth Gainan			
Signature of Notary Public	Notary Bublic State of State		
Effective Date: 11/8/16 Last Revision: 11/8/16	Notary Public State of Florida Peggy Elizabeth Garman My Commission HH 317136	Notary Seal/Stamp	
	PLANTING MY COMMISSION HH 317136	Total y bear blamp	

Expires 9/27/2026

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HERNANDO COUNTY CONDITIONAL USE PERMIT OR SPECIAL EXCEPTION USE PERMIT PETITION

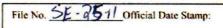


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HERNANDO COUNTY ZONING

Page 1 of 1

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Address: 230 May Avenue			
City: Brooksville	State: FL	Zip: 34601	
Phone:Email:			
Property owner's name: (if not the applicant)			
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Address: 29 S. Brooksville Avenue			
City: Brooksville	State: FL	Zip: 34601	
Phone: 352-796-5124 Email: dwi@djohnstonlaw.c	om		
HOME OWNERS ASSOCIATION: ☐ Yes ☑ No (if applicable provide	ie name)		
Contact Name:			
Address:	_City:Sta	ate:Zip:	
PROPERTY INFORMATION:			
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2. SECTION 20 , TOWNSHIP 22	RANGE 2	RANGE 20	
Current zoning classification:	,		
4. Desired use: Limited At-Home Business			
5. Size of area covered by application: 4.9 Acres and 3.4 Acres			
Highway and street boundaries: Weatherly Road			
7. Has a public hearing been held on this property within the past to	welve months? ☐ Yes ☑ No	•	
8 Will expert witness(es) be utilized during the public hearings?	☐ Yes ☑ No (If ye	s, identify on an attached list	
9. Will additional time be required during the public hearing(s) and		e needed:	
PROPERTY OWNER AFFIDIVAT			
PROFERIT OWNER AFFIDIVAT			
David Merritt and Lynnette M Merritt as Trustees			
I, David L. Merritt and Lynnette M. Merritt, as Trustees application and state and affirm that all information submitted within the	, nave thoroughly examined the	e instructions for filing this	
belief and are a matter of public record, and that (check one):	its petition are true and correct to the	e best of thy knowledge and	
☐ I am the owner of the property and am making this application C	NP.		
✓ I am the owner of the property and am authorizing (applicant):			
and (representative, if applicable): Darryl W. Johnston with Johnston			
to submit an application for the described property.	on Law Gloup, F.A.		
to such the an application for the described property.	1Axx		
	AUX Men		
	Signature of Property Owner		
STATE OF FLORIDA			
COUNTY OF HERNANDO	Flores	20	
The foregoing instrument was acknowledged before me this	day of 1 ENT VOY	, 20 <u>5</u> , by	
who is personall	y known to me or produced	as identification.	
60 1 11. 11 +			
M Day Like Man			
Signature Children Abilia			
Signature of Notary Public DA	RRYL W. JOHNSTON		
I € Cor	mmission # HH 148610	Note: C-UC	
	pires July 10, 2025	Notary Seal/Stamp	
CUD CDEV Amiliation Farm 11 00 16 Dam	ed Thru Troy Fain Insurance 800-385-7019		