

HERNANDO COUNTY ZONING AMENDMENT PETITION



Application to Change a Zoning Classification

Application request (check one):

Rezoning Standard PDP
Master Plan New Revised
PSFOD Communication Tower Other
PRINT OR TYPE ALL INFORMATION

Date: 10/1/2025

File No. H 25-24 Official Date Stamp:

RECEIVED

DEC 23 2025

HERNANDO COUNTY ZONING

APPLICANT NAME: Joseph Pastore

Address: 11192 Archer Avenue

City: Spring Hill

State: FL

Zip: 34608

Phone: 352-683-3363 Email: office@pastorecustombuilders.com

Property owner's name: (if not the applicant)

REPRESENTATIVE/CONTACT NAME: Frank DiCaro

Company Name: ProCivil 360, LLC

Address: 12 S. Main Street

City: Brooksville

State: FL

Zip: 34601

Phone: 352-593-4255 Email: permitting@procivil360.com

HOME OWNERS ASSOCIATION: Yes No (if applicable provide name)

Contact Name: _____

Address: _____ City: _____

State: _____ Zip: _____

PROPERTY INFORMATION:

1. PARCEL(S) **KEY NUMBER(S):** 86622
2. SECTION 25, TOWNSHIP 22, RANGE 17
3. Current zoning classification: PDP (GC) with Outside Storage
4. Desired zoning classification: PDP (GC) with Outside Storage
5. Size of area covered by application: 1.4
6. Highway and street boundaries: US 19 and Long Lake Avenue
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 hearings? Yes No (If yes, identify on an attached list.)
9. Will additional time be required during the public hearing(s) and how much? Yes No (Time needed: _____)

PROPERTY OWNER AFFIDAVIT

I, Joseph Pastore and Robin Pastore, have thoroughly examined the instructions for filing this application and state and affirm that all information submitted within this petition are true and correct to the best of my knowledge and belief and are a matter of public record, and that (check one):

I am the owner of the property and am making this application **OR**
 I am the owner of the property and am authorizing (applicant): _____
and (representative, if applicable): ProCivil 360, LLC
to submit an application for the described property.

Signature of Property Owner

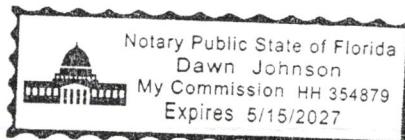
Robin Pastore

**STATE OF FLORIDA
COUNTY OF HERNANDO**

The foregoing instrument was acknowledged before me this 9th day of December, 2025, by
Joseph Pastore & Robin Pastore who is personally known to me or produced _____ as identification.

Dawn Johnson
Signature of Notary Public

Effective Date: 11/8/16 Last Revision: 11/8/16



Notary Seal/Stamp