HERNANDO COUNTY ZONING AMENDMENT PETITION File No. Official Date Stamp: Application to Change a Zoning Classification Application request (check one): Rezoning ☐ Standard ☐ PDP Master Plan □ New □ Revised 1 2024 PSFOD □ Communication Tower □ Other PRINT OR TYPE ALL INFORMATION Planning Department Date: lernando County. Florida APPLICANT NAME: trancine Address: 150 28 Middle Zip: 34609 State: FL City: Brooksville Phone: 352.593-41092 Email: · com Property owner's name: (if not the applicant) REPRESENTATIVE/CONTACT NAME: Company Name: Address: . City: State: Email: Phone: HOME OWNERS ASSOCIATION: ☐ Yes ☑ No (if applicable provide name) Contact Name: _ Address: City: State: Zip: PROPERTY INFORMATION: PARCEL(S) **KEY** NUMBER(S): 2. **TOWNSHIP RANGE** 3. Current zoning classification: Desired zoning classification: Ha ricoltura 5. Highway and street boundaries: Maira 6. 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.) Will additional time be required during the public hearing(s) and how much? ☐ Yes ☐ No (Time needed: ____ PROPERTY OWNER AFFIDIVAT , 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): to submit an application for the described property. Signature of Property Owner STATE OF FLORIDA

Signature of Notary Public

COUNTY OF HERNANDO

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

The foregoing instrument was acknowledged before me this



UL

day of

Francine, Charlosa & Terri Brooks who is personally known to me or produced FLDLs

KAYMARIE GRIFFITH Notary Public - State of Florida Commission # HH 163903 My Comm. Expires Aug 10, 2025

My Comm. Expires Aug 10, 2025
Bonced through National Notary Assn.

ry Seal/Stamp

HERNANDO COUNTY ZONING AMENDMENT PETITION	File NoOfficial Date Stamp:
Application to Change a Zoning Classification	4-24-47
Application request (check one):	1 1 1
Application request (check one): Rezoning ⊕ Standard □ PDP	Received
Master Plan □ New □ Revised	1111 1 2024
PSFOD Communication Tower Other	JUL 1 2024
PRINT OR TYPE ALL INFORMATION	2
Date: June 30, 2024	Planning Department Hernando County, Florida
APPLICANT NAME: David & Danielle Daniels	Southly. Florida
Address: 18396 Mairdale Rd	
City: Weeki Wachee State	e: FL Zip: 34614
City: Week: Wachee State Phone: (727) 644-7475 Email: didaniels 1110 Ogmaile	com
Property owner's name: (tj not the applicant)	
REPRESENTATIVE/CONTACT NAME:	
Address:State	e: Zip:
City:State Phone:Email:	Zip
HOME OWNERS ASSOCIATION: Yes No (if applicable provide name)	
Contact Name:	
Address:Ciry:	State: Zip:
PROPERTY INFORMATION:	
1. PARCEL(S) <u>KEY</u> NUMBER(S): 62461	
2. SECTION	, RANGE 18
3. Current zoning classification: Residential	
4. Desired zoning classification: Agricultural residential	
5. Size of area covered by application: 1.04 acres	
 6. Highway and street boundaries: Mairdale Rd. 7. Has a public hearing been held on this property within the past twelve months? ☐ Yes 	No.
	No (If yes, identify on an attached list.)
	No (Time needed:)
	Zaro (Time needed.
PROPERTY OWNER AFFIDIVAT	
I, <u>David & Danielle Daniells</u> , have thoroughly application and state and affirm that all information submitted within this petition are true and belief and are a matter of public record, and that (check one):	examined the instructions for filing this correct to the best of my knowledge and
✓ 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):to submit an application for the described property.	A
to submit an application for the described property.	
Signature of	David M D
STATE OF FLORIDA	repairs o mai
COUNTY OF HERNANDO The foregoing instrument was acknowledged before me this	22 2 3 .
The foregoing instrument was acknowledged before me this day of Who is personally known to me or production.	$\frac{,20\angle 2}{,}$ by uced FL DL \times 2 as identification.
Signature de Notary Public Effective Date: 11/8/16 Last Revision: 11/8/16	KAYMARIE GRIFFITH Notary Public - State of Florida Commission # HH 163903 My Comm. Expires Aug 10, 2025 Onded through National Notary #\$2000 Seal/Stamp

Danielle Daniels

18396 Mairdale Rd. Weeki Wachee FL 34614 (727) 644-7475 djdaniels1110@gmail.com

25th June 2024

Hernando County Planning Department

1653 Blaise Dr. Brooksville, FL 34601

To Whom It May Concern:

We are requesting rezoning for lots 1 & 2 on Mairdale Rd: Key # 0062461 & Key # 00595877 to Agricultural/residential. Each lot is just over one acre. This rezoning is necessary in order to fulfill AR permitted uses including: poultry or swine for home consumption, one grazing livestock per acre, green house and garden beds, aquaculture, and accessory buildings. We wish to make good, responsible use of these large lots in order to provide for our families and enrich the environment. Both lots meet county dimension and area regulations for agricultural/residential districts. Thank you for your consideration.

Sincerely,

Danielle Daniels Lanuelle Lanuels



