HERNANDO COUNTY CONDITIONAL USE PERMIT OR SPECIAL EXCEPTION USE PERMIT PETITION



Application request (check one):

- ☐ Conditional Use Permit
- Special Exception Use Permit

PRINT OR TYPE ALL INFORMATION

File No. CD-25-02 Official Date Stamp:

RECEIVED

JAN 0 7 2025

Hernando County Development Services
Zoning Division

receip+ # 34082

Address: 12500 HARRISON City: BROOKSVILLE Phone: (239) 295-9622	Date,					
City: BROOKSVILLE State: FL Zip. 34613 Phone: (23) 295-9622 Email: CROSSEY2009@HOTMAIL.COM Property owner's name: (if not the applicant) REPPRESENTATIVE/CONTACT NAME: RON COURINGTON Company Name: GAINEY CUSTOM HOMES Address: 7165 SOUTH SUNCOAST BLVD City: HOMOSASSA Phone: (352) 765-4805 Email: GCHPM@OUTLOOK.COM HOME OWNERS ASSOCIATION: Semail: GCHPM@OUTLOOK.COM PROPERTY INFORMATION: Address: No. (if ye., identify on a particular or company of the particular or control of the property within the past twelve months? Semail: GCHPM@OUTLOOK.COM Will expert witness(es) be utilized during the public hearings? Semail: GCHPM@OUTLOOK.COM Will additional time be required during the public hearings? Semail: GCHPM@OUTLOOK.COM Will additional time be required during the public hearings? Semail: GCHPM@OUTLOOK.COM Will additional time be required during the public hearings? Association of the property 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): CHRISTOPHER ROSSEY	APPLICANT NAME:	CHRISTOPHER ROSSEY				
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City: HOMOSASSA Phone (352) 765-4805 Email: GCHPM@OUTLOOK.COM HOME OWNERS ASSOCIATION: Yes M No 6/4 applicable provide name) Contact Name: Address: N/A City: N/A State: Zip: N/A PROPERTY INFORMATION: 1. PARCEL(S) KEY NUMBER(S): KEY#00107869 2. SECTION TOWNSHIP RANGE 3. Current zoning classification: SINGLE FAMILY / X FLOOD ZONE 4. Desired use: Special exception (ADD A SMALL MOBLE HOME) 5. Size of area covered by application: 25×80′ 2,000 sqft 6. Highway and street boundaries: HARRISON STREET 7. Has a public hearing been held on this property within the past twelve months? Yes M No 8. Will expert witness(es) be utilized during the public hearings? Yes M No (If yes, identify on an attached lis 9. Will additional time be required during the public hearing(s) and how much? Yes M No (Time needed: PROPERTY OWNER AFFIDIVAT 1. CHRISTOPHER ROSSEY have thoroughly examined the instructions for filing this papplication 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 X I am the owner of the property and am authorizing (applicant): GNN COURINGTON and (*apprenamics if applications): GAINEY CUSTOM HOMES to submit an application for the described property. STATE OF FLORIDA COUNTY OF HERNANDO The foregoing instrument was acknowledged before me this day of December as identification. STATE OF FLORIDA COUNTY OF HERNANDO As identification As identific					THE RESERVE AND PERSONS ASSESSED.	
Phone (352) 765-4805 Email: GCHPM@OUTLOOK.COM						
HOME OWNERS ASSOCIATION:	City: HOMOSAS	SA		State: FL		Zip: 34446
Contact Name: Address: N/A City: N/A State: Zip: N/A PROPERTY INFORMATION: 1. PARCEL(S) KEY NUMBER(S): KEY#00107869 2. SECTION	Phone: (352) 765-	4805 Email: GCHPM@	OUTLOOK.COM			
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PROPERTY INFORMATION:	Contact Name:	NI/A	one of the second secon	N/A		NI/Δ
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Christopher Rossey who is personally known to me or produced FL DL as identification. Notary Public State of Florida Dyan Ballew My Commission HH 577921			day of De	cember		, 20 <u>24</u> _, by
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Signature of Notary Public	11.00 - 12	00.	1 1			da
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	Signature of Notary Publi	С				[

Notary Seal/Stamp

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

To Whom It May Concern,

I am requesting an additional home on our property for my wife's sake. She has dementia that is rapidly progressing. Living in the same home as my son and daughter-in-law has become extremely distressing for all of us. Her illness is causing anxiety on my son and daughter-in-law as well as confusion for my grandchildren who do not understand what is happening. I am trying to preserve as much of my wife's dignity as possible, which is not easy since I need my son's help regularly but still need privacy to be able to take care of my wife's personal needs. It would allow me to have a smaller space in which my wife can move around freely without worrying about her getting hurt or embarrassing herself and my son to be near enough to help when needed. As her illness progresses, we will be having more people come into the home with eventually Hospice and her passing. I do not want my son and grandchildren to live in the same home in which my wife passes. The emotional distress her illness is already causing is too much, let alone having to live in the house in which she dies.

Approval from you to have our own home on the property would help all of us greatly and has become a necessity for our family.

Thank you for your time and consideration in helping me preserve my wife's dignity and make her passing more comfortable.









1/12/2024

To Whom this May Concern,

RE: Renee Rossey

At this time Renee Rossey is unable to work,

, I am her Physician,

agree to the above statement. Should you have any questions I can be reached at

Signed

Mario Talanga D.O.



Permit Authorization

Christopher Rossey	am the legal owner of the property					
described as 12500 Harrison St Brooksy	11e FL 34613					
I give full authorization to Ron Courington of Gainey	Modular and Manufactured Custom					
Homes, LLC to act on my behalf in all aspects of an application for a building permit in						
HernandO County. IWe understand that	Gainey Modular and Manufactured					
Custom Homes, LLC are not employees of any coun	ty and as such not responsible for					
any zoning and/or building restrictions and/or limitation	ons.					
I/We acknowledge that we are responsible for any surveys required by the county for						
permitting or Certificate of Occupancy.						
11718	7/211/2024					
Homeowner Signature	7/24/2024 Date 07/24/2024					
le funtion	07/24/2024					
Authorized Agent Signature	Date					
STATE OF FLORIDA						
COUNTY OF Catrus						
The foregoing instrument was acknowledged before me this _	24 day of July					
20 24 by Christopher Rossey and Royald	Court naten, who is/are					
personally known to me or who has produced	as identification.					
00 . 5						
(Notary Public Signature)	JOSEPH CANTRILL BARLOW MY COMMISSION # HH 140995					
(Motally) dollo Signature)	EXPIRES: October 11, 2025 Bonded Thru Notary Public Underwriters					
	Typed/Innted/Stamped Name)					