

**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. SE-22-09 Official Date Stamp:

Received

JUN 27 2022

Planning Department
Hernando County, Florida

Date: 06/21/2022

APPLICANT NAME: Alyssa Schabillon

Address: 12350 Genter Dr

City: Spring Hill

State: FL

Zip: 34609

Phone: 5632589118

Email: office@evolener.com

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

REPRESENTATIVE/CONTACT NAME: Alyssa Schabillon

Company Name: _____

Address: 12350 Genter Dr

City: Spring Hill

State: FL

Zip: 34609

Phone: 3097501111

Email: office@evolener.com

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

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

PROPERTY INFORMATION:

1. PARCEL(S) **KEY** NUMBER(S): 00567078

2. SECTION 27, TOWNSHIP 23, RANGE 18

3. Current zoning classification: _____

4. Desired use: Special Exception for a Congregate Care Facility

5. Size of area covered by application: 2.20 Acres

6. Highway and street boundaries: _____

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, Kelly Morrell, 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): Alyssa Schabillon

and (representative, if applicable): _____

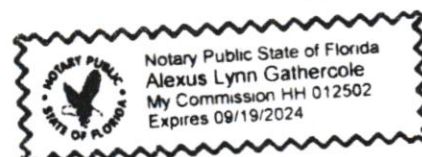
to submit an application for the described property.

Kelly Morrell
Signature of Property Owner

**STATE OF FLORIDA
COUNTY OF HERNANDO**

The foregoing instrument was acknowledged before me this 22nd day of June, 2022, by Kelly Morrell who is personally known to me or produced FL Driver as identification.

Alexus Lynn Gathercole
Signature of Notary Public



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

Notary Seal/Stamp

Narrative Description of Request

We are looking to increase the existing assisted living home from current occupancy of up to 6, to 8 immediately. After which we are looking to phase in to the state maximum according to all rules and regulations of 16 occupants. As such we are looking for Special exemption on the land use. We expect at full occupancy to have 2 full time staff on duty at all times. We expect to have 2-3 shift changes a day at varying times according to patient needs. We will use existing parking in front of garages, and U shaped drive way. We are planning on using existing structures, with some updates at a later date as we phase in the expansion as needed. We may also possibly look to add additional square footage to the existing structure at a later date as needed. Any additional footage will be within allowed setbacks of property.



3126 Sq FT Home
14180 Amero Ln
Spring Hill
2.5 Acres