

**HERNANDO COUNTY CONDITIONAL USE PERMIT
OR SPECIAL EXCEPTION USE PERMIT PETITION**

File No. CU-23-05 Official Date Stamp:



Application request (check one):
 Conditional Use Permit
 Special Exception Use Permit

PRINT OR TYPE ALL INFORMATION

Received
MAR 21 2023
Planning Department
Hernando County, Florida

Date: 03/22/2023

APPLICANT NAME: Anthony Joseph Prall, Jr.

Address: 15011 Daly Rd
City: Brooksville State: Florida Zip: 34601
Phone: 352 942 9017 Email: AnthonyPrall63@gmail.com
Property owner's name: (if not the applicant) N/A

REPRESENTATIVE/CONTACT NAME:

Company Name: N/A
Address: N/A
City: N/A State: N/A Zip: N/A
Phone: N/A Email: N/A

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

Contact Name: N/A
Address: N/A City: N/A State: N/A Zip: N/A

PROPERTY INFORMATION:

- 1. PARCEL(S) KEY NUMBER(S): R21-421-20-0000-0160-0091
- 2. SECTION 21, TOWNSHIP 21, RANGE 20
- 3. Current zoning classification: Agricultural
- 4. Desired use: Get permission special use permit for RV on my property
- 5. Size of area covered by application: 9.75 acres
- 6. Highway and street boundaries: Daly 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 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 AFFIDIVAT

I, Anthony Joseph Prall, Jr., 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.

Anthony J Prall
Signature of Property Owner

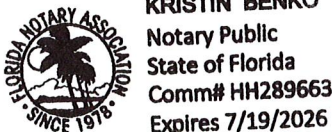
STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this 21st day of March, 2023, by Anthony Prall who is personally known to me or produced Florida as identification.

Kristin Benko
Signature of Notary Public

Driver license

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



Notary Seal/Stamp

Anthony Joseph Prall, Jr.
15011 Daly Road
Brooksville, Florida 34601

Received

MAR 21 2023

Planning Department
Hernando County, Florida

To whom it may concern:

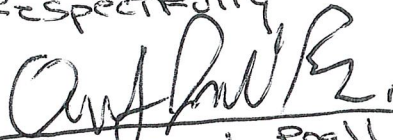
I am seeking permission to have my brother-in-law live in his RV on my property to help me with work on my land.

I am 69 years old and I have poor health, which is verified by my physician's letter. I can no longer keep up with the work necessary to keep my property up with help.

My brother-in-law is not charging me to help, but is doing so he cannot afford pay to live in his RV elsewhere. I live on Social Security and cannot afford to pay him.

Please consider granting me a special use permit for him to live on my land in his RV to help me take care of my land; my proof of income is attached to packet, \$9,200.00.

Respectfully submitted,


Anthony Joseph Prall
352-942-9017



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MAR 21 2023
Planning Department
Hernando County, Florida

Robert L. Hartzell, MD
Anil Bhatia, MD
Syed Ali, MD
Maria Tommolino, NP-C
11479 Cortez Blvd.
Brooksville, FL 34613
Phone (352) 597-3511
Fax (352) 592-1155

Date: March 16, 2023

RE: Anthony Prall

DOB: 12/14/53

To Whom it May Concern:

My patient, Anthony Prall, has been seen by me. This patient has several health conditions, that deem him to be disabled. This patient has to use the assistance of a walker for mobility. This patient also needs the assistance of a care giver at his disposal continually.

Should you have any questions or concerns, please feel free to contact my office.

Sincerely,

A handwritten signature in black ink, appearing to read "Syed Ali", is written over a horizontal line. The signature is fluid and cursive.

Syed Ali, MD