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: 6-6-2023

Official Date Stamp: File No. H-23-32

Received

JUN 07 2023

Planning Department

Hernando County, Florida · Shannon Parker Cocene APPLICANT NAME: Otis I Greene III Address: 8469 Medicine Stone Dr State: Florida City: WE 65+ET State: Flor Phone: 678/300-8005 Email: The Broken Acrow 23 @ qmail. com Property owner's name: (if not the applicant) REPRESENTATIVE/CONTACT NAME: Company Name: Address: State: City: Email: Phone: HOME OWNERS ASSOCIATION: Yes No (if applicable provide name) Contact Name: State: Zip: City: Address: PROPERTY INFORMATION: R11-121-21-0900-0750-0260 PARCEL(S) KEY NUMBER(S): _ SECTION 19839 , TOWNSHIP Current zoning classification: Desired zoning classification: Size of area covered by application: Highway and street boundaries: Medicine Stone Dr Has a public hearing been held on this property within the past twelve months?

Yes
No ☐ Yes No (If yes, identify on an attached list.) Will expert witness(es) be utilized during the public hearings? ☐ Yes X No (Time needed: _____ Will additional time be required during the public hearing(s) and how much? PROPERTY OWNER AFFIDIVAT I, Otis J Greene II & Shannon Karker Greene, 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.

COUNTY OF HERNANDO PINLIGS

The foregoing instrument was acknowledged before me this

__day of __ who is personally known to ne or produced (CIVEYS LICENTS identification.

hannon ascerb

by means of physical presence

Notary Public

STATE OF FLORIDA

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



MYAH MARTINEZ Notary Public - State of Florida Commission # HH 382665 My Comm. Expires Apr 4, 2027

Notary Seal/Stamp



Narrative Description of Request for Re-Zoning Application Otis J. Greene, III and Shannon P. Greene

8469 Medicine Stone Drive

Webster, FL 33597

Parcel: R22-122-21-0900-0750-0260

Key Number: 19839

To Whom It May Concern:

We are requesting re-zoning for the above-mentioned property at the corner of Medicine Stone Drive and Rolling Stone Drive in Ridge Manor Estates. Our current zoning is R1 and we would like to re-zone to AR.

1. Proposal

- a. Proposed land uses and their specific acreage: a small family farm with a garden and a few animals. The property is 4.15 acres.
- b. Proposed density level of residential uses: a single-family residential home approximately 2,800 square feet
- c. Proposed sq. ft. of development and building height(s) of commercial uses: N/A
- d. Proposed deviations from code: N/A

2. Site Characteristics

- a. Site Size (acres): 4.15
- b. Existing land uses and their specific acreage: vacant undeveloped land
- c. Known activities or uses on-site: none

3. Environmental Considerations

- a. Flood Zone: at the far south end of the property is a small area for a flood zone approximately 1-acre that will be a used portion for any structures.
- b. Drainage Features: N/A
- c. Water Features: N/A
- d. Habitats: N/A
- e. Conditions and Impacts on Natural Features: N/A