

HERNANDO COUNTY PLANNING
DEPARTMENT CLASS D SUBDIVISION
REVIEW APPLICATION

1653 Blaise Dr
Brooksville, FL 34601
352-754-4057e
akidd@co.hernando.fl.us

Date: 2/12/24
~~2/12/24~~ ck

APPLICANT: <u>Lisa Hulgim</u>
Mailing Address: <u>P.O. Box 10107 Brooksville, FL 34603</u> City, State, Zip Code:
Daytime Phone: <u>727 267 0484</u> Email: <u>LisaHulgim@gmail.com</u>
REPRESENTATIVE: _____
Mailing Address: _____ City, State, Zip Code: _____
Daytime Phone: _____ Email: _____
Legal Description: Write the complete legal description of the property below. Include Section, Township and Range, Subdivision Name, Lot, Block, and Unit Number. Attach additional sheet if necessary. <u>Track 16 Woodland Retreats UNREC Less 1/8 S 25 FDES</u> <u>IN ORB 498 PG 665</u>
PARCEL KEY NUMBER <u>00945856</u> SEC <u>25</u> TWP <u>33</u> (S) RANGE <u>19</u> (E)
Size of Area Covered by Application: <u>4.60</u>
Highway & Street Boundaries: <u>North Parcel on Chenoka RD/South Parcel on Cheerton Rd</u>
Number of Parcels Proposed: <u>2</u>
Minimum Size(s) of Lot(s) Created: <u>2.537 Acres</u> <u>2.083 Acres</u>

Board Of County Commissioners
Hernando County, Florida

NO. **33782**

DATE 2/12/24

RECEIVED FROM Lisa Hulgin \$ **150.00**

Planning #150.00
FOR Class D Sub. Div. Key # 945856 DOLLARS

RECEIPT

AMOUNT OF ACCOUNT		
THIS PAYMENT		
BALANCE DUE		

- CASH
- CHECK NO
- CREDIT CARD
- MONEY ORDER

BY Carmel J. Cline

ACKNOWLEDGMENT

This acknowledgment must be signed in the presence of a Notary Public.

I, Lisa Hulgjin, hereby state and affirm that I have read the instructions for filing this application and that:

- I am the owner of the property covered under this application.
- I am the legal representative of the owner of the property described, which is the subject matter of this application.

All answers to the questions in said application, all sketches and data attached and made part of this application are honest and true to the best of my knowledge and belief.

Lisa Hulgjin

Signature of Applicant or Representative

STATE OF FLORIDA

COUNTY OF HERNANDO

On this the 12th day of February, 2024, before me, the undersigned Notary Public of the State of Florida, personally appeared Lisa Hulgjin and whose name(s) is/are subscribed to the within instrument, and acknowledge that he/she/they executed it.

WITNESS my hand and official seal

Carrie L. Cline

Notary Signature



CARRIE L. CLINE
Commission # HH 259804
Expires May 1, 2026

NOTARY SEAL & COMMISSION

EXPIRATION:

The individual(s) are personally known to me or, presented the following Identification: FL DL Photo ID.

Property Split Tax Clearance Form

Florida Statutes: Title XIV
§197 Taxation and Finance

***§197.192 Land not to be divided or plat filed until taxes paid.** No land shall be divided or subdivided and no drawing or plat of the division or subdivision of any land, or declaration of condominium of such land, shall be filed or recorded in the public records of any court until all taxes have been paid on the land.*

As a result of the above statute, you are required to provide this form signed by the Hernando County Tax Collector's Office certifying that the taxes on the property proposed to be split have been paid through the current tax year.

DATE: 2/12/24

I, hereby certify that the property taxes on parcel

Key number 009 45 85C have been paid through the current tax year.

Sally L. Daniel, CFC
Hernando County Tax Collector
Hernando County Government Center
20 North Main Street, Room 112
Brooksville, FL 34601
(352) 754-4180

By: Kerriann Papineau
Print Name: Kerriann Papineau
Title: Customer Service Rep

SEAL

