HERNANDO COUNTY ZONING AMENDMENT PETITION



Date: _11/04/2024

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

File No.	Official Date Stamp:					
H-24-74 Received						
NO	V 08 2024					

Planning Department Hernando County, Florida

	1 1:114 400	110					
APP	LICANT NAME: Hilltop 408	3, LLC					
	Address: 401 Commerce St, Suite 800	The state of the s					
	City: Nashville			State: TN	Zip: 37219		
	Phone:	_ Email:					
	Property owner's name: (if not it	the applicant)					
REP	RESENTATIVE/CONTACT N	AME: lan Anderson					
	Company Name: Catalyst Design Group						
	Address: 1085 W Morse Blvd						
	City: Winter Park			State: FL	Zip: 32789		
	Phone: 689-219-8900	Email: ianderson@catalyst-dg.com					
HO	ME OWNERS ASSOCIATION	Yes No (if applicable provide n	ame)				
	Address:		City:		State: Zip:		
PRO	PERTY INFORMATION:						
1.). 1775877					
2.	SECTION 30): <u>1775877</u> , TOWNSHIP <u>23 \$</u>		, RANGE	18 E		
3.	Current zoning classification:	PDP(OP)					
4.	Desired zoning classification:	PDP(OP) (Master plan revision)					
5.	Size of area covered by applicat	ion: 1.75 ac					
6.	Highway and street boundaries:	Spring Hill Dr (north), Lindsay Ave (south, Deering Ave (east)					
7.	Has a public hearing been held	on this property within the past twe	lve months?	☐ Yes ■ No			
8	Will expert witness(es) be utiliz	ed during the public hearings?		☐ Yes ■ No (It	f yes, identify on an attached list.)		
	Will additional time be required	during the public hearing(s) and h	ow much?	☐ Yes ■ No (T	ime needed: none		
9.	will additional time be required	during the public hearing(s) and h	ow much.	= 100 = 110 (1			
PRO	PERTY OWNER AFFIDIVAT						
I Hillto	pp 408, LLC		, have tho	roughly examine	d 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							
belie	f and are a matter of public record	l, and that (check one):					
			Ł				
100000	 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	_				
	to submit an application for the	described property.					
			-(/	lan lan	Anderson (CDG), Authorized Agent		
	Tennouse.			nature of Property O			
CT 4	TE OF FLORIDA	1	518	nature of Property o			
COU	Tennessee TEOFFLORIDA INTY OF HERNANDO DAVI	idsor			14h		
The	foregoing instrument was acknow	ledged before me by means of \Box p	hysical prese	nce or Z online	notarization, this 4 day of		
9	Jovember	, 20 <u>24</u> , by <u>An</u>	anda	soon	who is		
D pe	ersonally known to me or produ	as identification.	4111111	LLA Valle			
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	1. 10 9		0	OF STATE			
	Triscella L	ance	TE	NNESSEE :			
Sign	ature of Notary Public			IOTARY :			
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Effe	ctive Date: 05/15/20 Last Revis	ion: 05/15/20	Co 10	SON COUNTY	Notary Seal/Stamp		
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			-101	EXPILES	D 1 C1		



November 4, 2024

Spring Hill FSER
Civil Engineering Narrative
Hernando County, Florida

PROJECT DESCRIPTION / REQUEST

The proposed project is the development of a free-standing emergency room (FSER). The site is located on the south side of Spring Hill Drive between the Fellowship Community Church and the Seven Hills Shopping Plaza in Hernando County, Florida. The property consists of a ± 1.75 -acre vacant parcel, Parcel Key number 1775877. The parcel is zoned Planned Development Project - Office Professional [PDP(OP)] and associated with Hernando County Resolution Number 2019-68. The proposed development consists of an approximate 11,000 square foot FSER, and will include parking, secondary storm system, stormwater and associated utility infrastructure. The development has potential for future expansion which has been evaluated for the location of infrastructure. A master plan revision for the above referenced planned development is requested.