

# 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: 10/1/2025

H-25-5a  
File No. \_\_\_\_\_ Official Date Stamp:

**APPLICANT NAME:** Joseph Pastore

Address: 11192 Archer Avenue

State: FL Zip: 34608

City: Spring Hill

Phone: 352-683-3363 Email: office@pastorecustombuilders.com

Property owner's name: (if not the applicant) \_\_\_\_\_

**REPRESENTATIVE/CONTACT NAME:** Frank DiCaro

Company Name: ProCivil 360, LLC

Address: 12 S. Main Street

State: FL Zip: 34601

City: Brooksville

Phone: 352-593-4255 Email: permitting@procivil360.com

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

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### PROPERTY INFORMATION:

1. PARCEL(S) **KEY NUMBER(S):** 86622
2. SECTION 25, TOWNSHIP 22, RANGE 17
3. Current zoning classification: PDP (GC) with Outside Storage
4. Desired zoning classification: PDP (GC) with Outside Storage
5. Size of area covered by application: 1.4
6. Highway and street boundaries: US 19 and Long Lake Avenue
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, Joseph Pastore and Robin Pastore, 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**

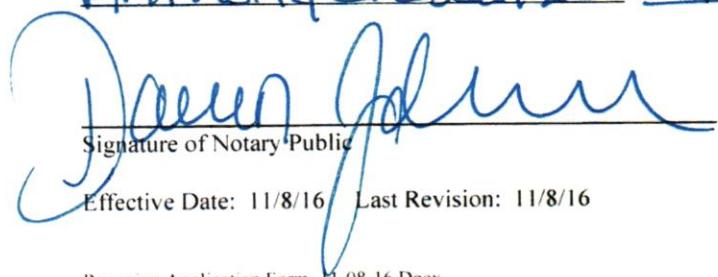
I am the owner of the property and am authorizing (applicant): \_\_\_\_\_ and (representative, if applicable): ProCivil 360, LLC to submit an application for the described property.

Signature of Property Owner

### STATE OF FLORIDA

### COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this 2nd day of January, 2026, by Anthony Crescenza who is personally known to me or produced \_\_\_\_\_ as identification.

  
Signature of Notary Public



Notary Seal Stamp

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