

Received

OCT 13 2023

HERNANDO COUNTY ZONING DIVISION
ZONING APPEAL APPLICATION

OFFICE USE ONLY
DATE REC'D

FILE NO.

Planning Department
Hernando County, Florida

This application must be completed and returned, with all documents and check specified on the instruction sheet, to this office before a board hearing will be scheduled. Please note that the petitioner or representative is required to be present at the hearing.

Applicant Name: Drew Mayer Date: Oct 13, 2023

Mailing Address: 5048 Culbreath Rd Brooksville

Phone No. 352-410-9032 Fax: _____

E-Mail: _____

Representative Name (if applicable): _____

Mailing Address: _____

Phone No. _____ Fax: _____

E-Mail: _____

Address of Property: 5040 Culbreath Rd Brooksville

Legal Description: N 1/2 of NE 1/4 of SW 1/4 of NE 1/4 less w
430 Ft of S253 Ft thereof less W50Ft AKA Par
in class 4 subdivision

Key No.: 1486305 Zoning District: Ag

Homeowners Association Yes _____ No X If yes, name of HOA _____

Contact Name: _____

Contact Address: _____ City: _____ State _____ Zip _____

Signature of applicant or representative: Drew Mayer

OWNER AFFIDAVIT

I, Drew Moyer, HEREBY STATE AND AFFIRM THAT:

P I am the owner of the property and am making this application OR

_____ I am the owner of the property and am authorizing the entity below to submit an application on the described property. The entity shall complete the affidavit below.

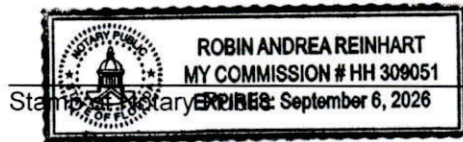
I have read the instructions for filing this application. All answers to the questions in said application, all sketches and data attached to and made part of this application are honest and true to the best of my knowledge and belief and are a matter of public record.

Drew Moyer
Signature of property owner

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this 13 day of October, 2023
by Drew Moyer, who is (_____) personally known to me or who (P) has produced
FL DL as identification.

Robin Reinhart
Signature of Notary Public



AGENT/REPRESENTATIVE AFFIDAVIT

I, _____, HEREBY STATE AND AFFIRM THAT:

_____ I am the legal representative of the owner or lessee of the property described, which is the subject matter of the application. I have been authorized by the owner identified above to proceed with this application.

I have read the instructions for filing this application. All answers to the questions in said application, all sketches and data attached to and made part of this application are honest and true to the best of my knowledge and belief and are a matter of public record.

Signature of representative

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this _____ day of _____, 2_____
by _____, who is (_____) personally known to me or who (_____) has produced
_____ as identification.

Signature of Notary Public

Stamp of Notary Public