

CU-25-13

HERNANDO COUNTY CONDITIONAL USE PERMIT
OR SPECIAL EXCEPTION USE PERMIT PETITION



Application request (check one):

- ☒ Conditional Use Permit
☐ Special Exception Use Permit

PRINT OR TYPE ALL INFORMATION

File No. CU-25-13 Official Date Stamp:

RECEIVED

SEP 10 2025

HERNANDO COUNTY ZONING

Date: 9-7-25

APPLICANT NAME: Cheisty Halbert
Address: 294 Myers Rd
City: Brooksville State: FL Zip: 34602
Phone: 813 469 6181 Email: Cheistydh@protonmail.com
Property owner's name: (if not the applicant) _____

REPRESENTATIVE/CONTACT NAME: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

HOME OWNERS ASSOCIATION: ☐ Yes ☒ No (if applicable provide name) _____
Contact Name: _____
Address: _____ City: _____ State: _____ Zip: _____

PROPERTY INFORMATION:
1. PARCEL(S) KEY NUMBER(S): Key 1262582 Parcel R36423 20 0000 0060 0010
2. SECTION 36, TOWNSHIP 23, RANGE 20
3. Current zoning classification: AG
4. Desired use: Conditional Use Permit for temporary residence
5. Size of area covered by application: 9.60 acres
6. Highway and street boundaries: Myers Rd
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 AFFIDIVAT

I, Cheisty Halbert, 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.

Cheisty Halbert
Signature of Property Owner

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this 10th day of September, 20 25, by
Cheisty Halbert who is personally known to me or produced FID# H4116.104-78.952-0 as identification.

James O'Keefe
Signature of Notary Public



JESSICA LANE VARGAS
Notary Public
State of Florida
Comm# HH265410
Expires 6/6/2026

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

Notary Seal/Stamp

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OCT 16 2025

Hernando County Development Services
Zoning Division

HBG

Date: 10/14/2025

APPLICANT NAME: Troy Sweat

Address: 294 Myers Rd

City: Brooksville

State: FL

Zip: 34602

Phone: 352-544-7705

Email: oldsouthllc@protonmail.com

Property owner's name: (if not the applicant) Christy Halbert and Troy Sweat

REPRESENTATIVE/CONTACT NAME:

Company Name: Christy Halbert or Troy Sweat

Address: 294 Myers Rd

City: Brooksville

State: FL

Zip: 34602

Phone: 813-469-6181

Email: Christydh@protonmail.com

HOME OWNERS ASSOCIATION: ☐ Yes ☒ No (if applicable provide name) _____

Contact Name: _____

Address: _____

City: _____

State: _____

Zip: _____

PROPERTY INFORMATION:

1. PARCEL(S) KEY NUMBER(S): 1262582

2. SECTION 36, TOWNSHIP 23, RANGE 20

3. Current zoning classification: AG

4. Desired use: Conditional Use

5. Size of area covered by application: 9.60

6. Highway and street boundaries: Myers Rd

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 AFFIDIVAT

I, TROY SWEAT, 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.

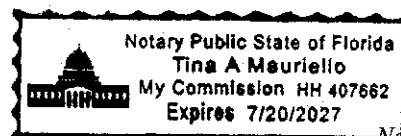
[Signature]
Signature of Property Owner

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 14 day of October, 20 25, by TROY SWEAT who is

☒ personally known to me or ☐ produced _____ as identification.

[Signature]
Signature of Notary Public



Effective Date: 05/15/20 Last Revision: 05/15/20