

**HERNANDO COUNTY CONDITIONAL USE PERMIT
OR SPECIAL EXCEPTION USE PERMIT PETITION**

File No. _____ Official Date Stamp:

CU-24-12

Received

AUG 12 2024

Planning Department
Hernando County, Florida



Application request (check one):

- Conditional Use Permit
- Special Exception Use Permit

PRINT OR TYPE ALL INFORMATION

Date: 08/08/2024

APPLICANT NAME: LEROY T + LINDA P OAKES

Address: 12349 BIRCH ST

City: BROOKSVILLE

State: FL

Zip: 34613

Phone: 352 238-6844 Email: LOLOFL1234@gmail.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): 422019
2. SECTION 20 TOWNSHIP 22, RANGE 18
3. Current zoning classification: RIC
4. Desired use: CONDITIONAL USE
5. Size of area covered by application: _____
6. Highway and street boundaries: BIRCH ST AND PINEWOOD ST
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, LINDA P. OAKES AND LEROY T OAKES, 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.

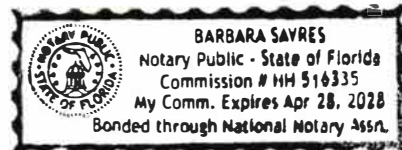
Linda P. Oakes Leroy T Oakes
Signature of Property Owner

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 11TH day of AUGUST, 2024, by Linda P. OAKES AND LEROY T. OAKES who is

personally known to me or produced ADULTER LICENSE as identification.

Barbara Sayres
Signature of Notary Public **Barbara Sayres**



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

Notary Seal/Stamp

Leroy T and Linda P Oakes 12349 Birch St. Brooksville, FL 34613 Aug. 2024

REQUEST FOR CONDITIONAL USE PERMIT FOR PROPERTY IN HERNANDO COUNTY

PARCEL: R20 222 18 3035 0090 0090
KEY: 422 019

We are requesting a conditional use permit for the lot adjacent to our home. Our need is to put a small mobile home or trailer on this lot that our 47 year old son can live in. He is mentally and physically handicapped and is on disability. He presently lives alone but due to the deterioration of his health this is no longer advisable. He no longer drives and cannot function normally with his activities of daily living such as cooking meals, shopping etc. We are his 85 year old father and 73 year old mother living approximately 16 miles away and we have taken on the responsibility of providing for his needs including his numerous rides to doctor appointments and pharmacy runs. This, given our ages, has become increasingly difficult for us to run back and forth to his current address. We feel the need to have him living close to us so that not only his transportation needs are cared for but also we will be able to provide daily meals for him, do his laundry at our home and just have the regular supervision that he needs. We do not have the room in our home to accommodate him so we are asking for a conditional use permit for the vacant lot next to us knowing that this will be extremely helpful to us in providing all the assistance our son requires.

Thank you so much for your consideration of our petition!

Received

AUG 12 2024

Planning Department
Hernando County, Florida

Leroy T Oakes

Linda P Oakes