

**HERNANDO COUNTY PLANNING
DEPARTMENT CLASS D SUBDIVISION
REVIEW APPLICATION**

1653 Blaise Dr.
Brooksville, FL 34601
352-754-
akidd@co.hernando.fl.us

Date: 8/2/2023

APPLICANT: <u>Elizabeth A. Hill Hee</u>	
Mailing Address:	<u>12381 Sunshine Grove Rd</u>
City, State, Zip Code:	<u>Brooksville FL</u>
Daytime Phone:	<u>352-584-6901</u> Email: <u>elizabethhickey821@gmail.com</u>
REPRESENTATIVE: _____	
Mailing Address:	_____
City, State, Zip Code:	_____
Daytime Phone:	_____ Email: _____
Legal Description: Write the complete legal description of the property below. Include Section, Township and Range, Subdivision Name, Lot, Block, and Unit Number. Attach additional sheet if necessary. _____ _____	
PARCEL KEY NUMBER <u>973343</u>	SEC <u>33</u> TWP <u>21</u> (S) RANGE <u>18</u> (E)
Size of Area Covered by Application: <u>10 Acres</u>	_____
Highway & Street Boundaries: <u>Sunshine Grove Road</u>	_____
Number of Parcels Proposed: <u>2</u>	_____
Minimum Size(s) of Lot(s) Created: <u>3.0 and 6.77</u>	_____

ACKNOWLEDGMENT

This acknowledgment must be signed in the presence of a Notary Public.

I, Elizabeth Anne Hickey, hereby state and affirm that I have read the instructions for filing this application and that:

- I am the owner of the property covered under this application.
- I am the legal representative of the owner of the property described, which is the subject matter of this application.

All answers to the questions in said application, all sketches and data attached and made part of this application are honest and true to the best of my knowledge and belief. -

Elizabeth Anne Hickey

Signature of Applicant or Representative

STATE OF FLORIDA

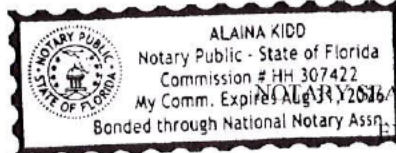
COUNTY OF HERNANDO

On this the 2nd day of August, 2023, before me, the undersigned Notary Public of the State of Florida, personally appeared Elizabeth Hickey and whose name(s) is/are subscribed to the within instrument, and acknowledge that he/she/they executed it.

WITNESS my hand and official seal

Alaina Kidd

Notary Signature



NOTARY PUBLIC & COMMISSION EXPIRATION:

The individual(s) are personally known to me or, presented the following Identification: FL DL REDACTED.

Property Split Tax Clearance Form

Florida Statutes: Title XIV
§197 Taxation and Finance

§197.192 Land not to be divided or plat filed until taxes paid. No land shall be divided or subdivided and no drawing or plat of the division or subdivision of any land, or declaration of condominium of such land, shall be filed or recorded in the public records of any court until all taxes have been paid on the land.

As a result of the above statute, you are required to provide this form signed by the Hernando County Tax Collector's Office certifying that the taxes on the property proposed to be split have been paid through the current tax year.

DATE: 10-28-03

I, hereby certify that the property taxes on parcel

Key number 9733413 have been paid through the current tax year.

Sally L. Daniel, CFC
Hernando County Tax Collector
Hernando County Government Center
20 North Main Street, Room 112
Brooksville, FL 34601
(352) 754-4180

By: HERNANDO COUNTY TAX COLLECTOR
Print Name: Daniene Allen
Title: clerk

SEAL HERNANDO COUNTY TAX COLLECTOR

Class D Subdivision Department of Public Works Clearance Form

Pursuant to Hernando County Ordinance, Chapter 26, Section 26-3, Class D (1), Applicants must receive driveway location approval by the Department of Public Works prior to approval of the Class D subdivision. Department of Public Works is located at 1525 E. Jefferson St., Brooksville, FL 34601.

Please submit this form with one copy of the survey showing proposed driveway and access locations to the Department Of Public Works for review. The review results will be returned to the Subdivision Review Technician. A fee set by the Department of Public Works will be collected with the clearance form submittal.

Date: 7/25/2023 Parcel Key: 00973343

Print Applicant Name: Elizabeth Hickey

Applicant Address: 12381 Sunshine Grove Rd

Applicant Phone Number: 352-584-6901

Applicant Email address: elizabeth.hickey821@gmail.com

Review Results:

Department of Public Works inspector Name: Tray McCann

The proposed driveway location is **approved** by the Department of Public Works. At such time a driveway installation or Right-of-Way improvement is proposed, a Right-of-Way permit or Building Department driveway permit will be required prior to construction.

The proposed driveway location is **not approved**.

Notes: _____

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7-25-2023 *[Signature]* Receipt # 3922
Pd \$100 ck # 7909