

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: 5/3/2023

File No. _____ Official Date Stamp: H-23-26

Received

MAY 3 2023

Planning Department
Hernando County, Florida

APPLICANT NAME: F. O. Enterprises, LLC

Address: 9124 Gallup Circle
 City: Spring Hill State: FL Zip: 34608
 Phone: 352-683-3363 Email: office@pastorecustombuilders.com
Property owner's name: (if not the applicant) _____

REPRESENTATIVE/CONTACT NAME: Alan Garman

Company Name: ProCivil360, LLLC
 Address: 12 S. Main Street
 City: Brooksville State: FL Zip: 34601
 Phone: 352-593-4255 Email: permitting@procivil360.com

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

Contact Name: _____
 Address: _____ City: _____ State: _____ Zip: _____

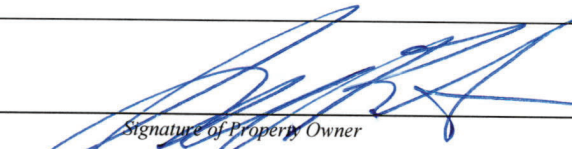
PROPERTY INFORMATION:

1. PARCEL(S) **KEY** NUMBER(S): 1027855
2. SECTION 14, TOWNSHIP 23, RANGE 17
3. Current zoning classification: PDP (OP)
4. Desired zoning classification: PDP (GC) with specific C-2 Uses of mini-storage and outside storage
5. Size of area covered by application: 6.24
6. Highway and street boundaries: Forest Oaks Blvd.
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, Joseph 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):

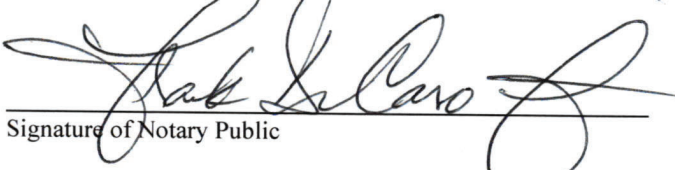
- I am the owner of the property and am making this application **OR**
- I am the owner of the property and am authorizing (applicant): _____ and (representative, if applicable): ProCivil360, LLC to submit an application for the described property.



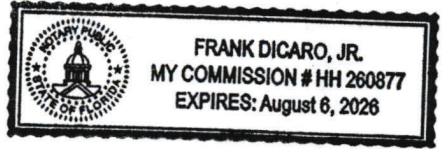
 Signature of Property Owner

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this 3 day of May, 2023, by Joe Pastore who is personally known to me or produced _____ as identification.



 Signature of Notary Public



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

Notary Seal/Stamp