



VARIANCE APPLICATION

Howey-in-the-Hills

PLEASE PRINT LEGIBLY

Property Owner (if there are multiple owners, please provide all the information on the attached ownership list): _____

Property Owner's Contact Information (If multiple owners, please provide mailing address, daytime phone, and fax and/or email for each owner):

First Owner: Lake Harris (Orlando) ASLI VII Owner #1 LLC

Mailing Address: 923 N. Pennsylvania Ave., Winter Park, FL 32789

Daytime Phone: _____

Fax and/or Email: _____

Second Owner: _____

Mailing Address: _____

Daytime Phone: _____

Fax and/or Email: _____

If more than two owners, please attach additional information.

Applicant (If different from owner): WindCrest Development Group, Inc. Tom Murray, Principal

Mailing Address: 605 E. Robinson St., Suite 340, Orlando, FL 32801

Daytime Phone: (407) 219-3540

Fax and/or Email: tmurray@windcrestinc.com

If the Applicant does not own the property, or is not the sole owner, please complete the Authorized Agent Affidavit form, attached.

If the Applicant is Not the Owner of the Property, is the Applicant:

- A Tenant
- An Authorized Agent for the Owner
- Other (please explain): _____

Property's Physical Address: North corner, intersection of CR-48 and SR-19

The attached Verified Legal Description Form must also be completed as part of the application.

A survey of the property, showing all current improvements on the site, to scale, is required as part of the application submittal. The survey can be no larger than 11" X 17" in size.

An additional copy of the survey or a site plan drawn to scale should be included as part of the application which specifically shows any improvements that are being requested as part of the variance. Again, this site plan can be no larger than 11" X 17" in size.

Property Information: Tax Parcel ID: 23-20-25-0004-000-00200 Alt Key #: 1780438

Please identify below the current land uses located on the site and all adjacent properties. For example, land uses would be identified as single family home, office, grocery store, etc.

Subject Site: Abandoned citrus

Adjacent property to the North: Vacant

Adjacent property to the South: CR-48 and golf

Adjacent property to the East: SR-19 and vacant

Adjacent property to the West: Abandoned citrus

Does the property currently have:

Town Water: YES NO

Central Sewer: YES NO

Potable Water Well: YES NO

Septic Tank: YES NO

How long has the current owner owned the property? 2013 - current

Please attach property tax records or other documentation to verify how long the current owner has owned the property.

What specific Code requirement is the applicant seeking a variance from?

1. Sec. 7.04.02

2. Sec. 7.05.01 (C)

What, in the applicant's point of view, are the specific special conditions or circumstances that exist on the property?

Please see attached.

What, in the applicant's point of view, is the unnecessary and undue hardship that exists to provide justification for the variance?

Please see attached.

The applicant should provide any additional information that may be helpful to the Town in rendering a decision on the requested variance.

Please see attached.

Additional information may be necessary. The applicant is required to provide a daytime telephone number where he/she can be reached.

The applicant is required to provide the names and mailing addresses of all property owners within 300 feet of the subject property, in the form of mailing labels. Three (3) sets of labels are required. These names and addresses may be obtained from the Lake County Property Appraiser's Office.

The Town will also provide a sign which must be posted on the subject property, visible from the adjacent right-of-way or road access. The sign must be posted at least one week prior to the Planning and Zoning Board meeting where this application will be on the agenda and the sign must remain posted until the Town Council public hearing.

A \$400 application fee is due and payable at the time this application is submitted to the Town. In addition to this application fee, a \$1,000 review deposit is required. By signing this application, the applicant acknowledges that the \$400 application fee covers advertising costs, mailings, and the time spent on the application by the Town Clerk. The applicant also acknowledges by his/her signature below that he/she understands he or she will be responsible for any additional costs that the Town incurs as a result of having Town consultants review the application. Once those additional costs are paid by the applicant, the Town will return the balance of the \$1,000 review deposit to the applicant. By signing this application, the applicant also acknowledges that he/she understands that variances expire if not acted upon within the timeframes outlined in the Town's Land Development Regulations.

Witnesses:

Applicant:


 X Signature

Nicole Martin
 Print Name


 X Signature

Benjamin Beckham
 Print Name


 X Signature

Tom Murray, Principal
 Print Name

Please hand deliver completed application and fee to:

Town Clerk
Town of Howey in the Hills
101 N. Palm Avenue
Howey in the Hills, FL 34737

Please make application fee and review deposit checks payable to the Town of Howey in the Hills.

The Town Clerk may be reached at 352-324-2290 or by visiting Town Hall during normal business hours.

FOR TOWN CLERK OFFICE USE ONLY

Date Received: _____

- _____ 3 sets of labels attached?
- _____ current survey attached?
- _____ site plan attached showing proposed improvements?
- _____ verified legal description form attached?
- _____ authorized agent affidavit attached?
- _____ ownership list attached?

APPLICATION NO. _____

Reviewed and Accepted By: _____

Provided to Town Planner on: _____

Planning & Zoning Board meeting date: _____

Town Council meeting date: _____

Seeking variance to delete foundation plantings as required by Code Sec. 7.04.02

1. **Compliance with ADA Accessibility:**

- **Special Condition:** Obstacles to ADA compliance.
- **Circumstances:** Foundation plantings are identified as obstacles to ADA compliance, hindering accessibility. The removal of these plantings is proposed to ensure that the property is accessible to all individuals without any hindrance, aligning with ADA requirements. The removal of the foundation plantings ensures the property is accessible to all individuals without hindrance.

2. **Health and Safety Concerns:**

- **Special Condition:** Presence of safety hazards.
- **Circumstances:** The applicant expresses concerns about health and safety issues associated with certain plants, including allergies to customers that are not known, and attraction of pests. Foundation plantings can be more susceptible to increased risk of trip and fall injuries. Removal is advocated as a measure to mitigate these risks and ensure a safer environment.

3. **Unique Property Characteristics:**

- **Special Condition:** Unique features or constraints.
- **Circumstances:** The limited space between the building and sidewalks is highlighted as a unique characteristic making it impractical to maintain foundation plantings. Compliance is argued to create undue hardship due to these unique property characteristics.

4. **Structural Integrity:**

- **Special Condition:** Risk to building structure.
- **Circumstances:** There are potential risks posed by the foundation plantings to the structural integrity of the building. The removal is necessary to prevent possible future damage to the foundation or other essential structures.

5. **Aesthetic or Design Considerations:**

- **Special Condition:** Clash with intended aesthetic.
- **Circumstances:** Foundation plantings are asserted to clash with the intended aesthetic and design plans for the property. Removal is presented as a solution to avoid undue hardship in achieving the desired vision for the property.

Seeking variance to delete landscape divider islands, as required by Code Sec. 7.05.01 (C)

1. **Space Utilization:**

- Special Condition: Limited available land.
- Circumstances: The applicant asserts that the available land is restricted, and the presence of landscape islands represents an inefficient use of space. Removing the islands is deemed necessary to optimize space utilization, accommodating the required parking demand for the shopping center use.

2. **Traffic Flow and Safety:**

- Special Condition: Impact on traffic flow.
- Circumstances: The applicant argues that the landscape islands adversely affect traffic flow within the parking lot. Removal is proposed to enhance vehicular movement, reduce congestion, and improve overall safety for drivers and pedestrians, especially those using shopping carts.

3. **ADA Accessibility:**

- Special Condition: Obstacles to ADA compliance.
- Circumstances: The applicant points out that the landscape islands create barriers to compliance with the Americans with Disabilities Act (ADA), specifically in relation to accessible parking spaces. Removing the islands is presented as a solution to ensure ADA requirements are met without hindrance.

4. **Cost Considerations:**

- Special Condition: Ongoing costs for maintenance.
- Circumstances: The applicant emphasizes the economic aspect, stating that maintaining landscape islands incurs ongoing costs related to landscaping, irrigation, and maintenance. The proposal suggests that removing the islands would result in cost savings for both the property owner and users of the parking facility.

5. **Property Design and Aesthetics:**

- Special Condition: Conflict with property design.
- Circumstances: The presence of landscape islands is said to conflict with the overall design and aesthetics of the property. Removal is advocated to create a more cohesive and visually appealing parking layout that aligns with the desired aesthetic for the shopping center.



Authorized Agent Affidavit

STATE OF FLORIDA
COUNTY OF LAKE

Before me, the undersigned authority, this day personally appeared Thomas Murray hereinafter "Owner", and Tom Murray, Principal hereinafter "Applicant", who, being by me first duly sworn, upon oath, depose and say: WindCrest Development Group, Inc.

1. The Applicant is the duly authorized representative of the Owner, on the real property as described and listed on the pages attached to this affidavit and made a part of hereof.
2. That all Owners have given their full and complete permission for the Applicant to act in their behalf as set out in the accompanying application.
3. That the attached ownership list is made a part of the Affidavit and contains the legal description(s) for the real property, and the names and mailing addresses of all Owners having an interest in said land.

FURTHER Affiant(s) sayeth not.

Sworn to and subscribed before me this
10th day of Jan, 2024

~~X~~ [Signature] 01-10-2024
Owner (Authorized Agent)

~~X~~ [Signature]

Notary Public
State of Florida at Large
My Commission Expires: _____



NICOLE MARTIN
Commission # HH 249622
Expires August 5, 2026

Sworn to and subscribed before me this
____ day of _____, 20____

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____

Sworn to and subscribed before me this
____ day of _____, 20____

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____

Sworn to and subscribed before me this
____ day of _____, 20____

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____



Ownership List

(must be completed by all owners)

Owner's Name: Lake Harris (Orlando) ASLI VII Owner #1 LLC
 Ownership Interest: _____
 Mailing Address: 923 N. Pennsylvania Ave.
Winter Park, FL 32789
 Legal Description: _____

~~X~~ Thomas Murray
 Signature (Authorized Agent)

01-10-2024
 Date

The foregoing instrument was acknowledged before me on 1/10/24 by Thomas Murray who is personally known to me or has presented as identification and who did _____ or did not take an oath.



NICOLE MARTIN
 Commission # HH 249622
 Expires August 5, 2026

~~X~~ Nicole Martin
 Notary Public

Seal

Owner's Name: _____
 Ownership Interest: _____
 Mailing Address: _____
 Legal Description: _____

Signature

Date

The foregoing instrument was acknowledged before me on _____ by _____ who is personally known to me or has presented as identification and who did _____ or did _____ not take an oath.

Notary Public

Seal

MULTIPLE COPIES OF THIS FORM MAY BE MADE AND ATTACHED AS NECESSARY.

RE: Project Name: **TBD Grocery**
Parcel #23-20-25-0004-000-00200, Alt Key #1780438

To Whom It May Concern:

I hereby authorize WindCrest Development Group, Inc. (APPLICANT) and Madden, Moorhead & Stokes, LLC (ENGINEER) to apply for and obtain permits from County/City Government, Water Management District, Florida Department of Environmental Protection, Florida Department of Transportation, Army Corps of Engineers and any other municipality or regulatory entity requiring permits be issued.



Owner Signature

10/6/2023

Date

Print Name: Ryan Lefkowitz, Vice President/Agent of Seller

Print Phone #: (407) 628-8488

Print Email Address: rlefkowitz@avantiprop.com

For:
LAKE HARRIS (ORLANDO) ASLI VII OWNER #1 LLC
923 N PENNSYLVANIA AVE
WINTER PARK, FL32789

Sworn to and subscribed before me this 6 day of October, 2023, by Ryan Lefkowitz. He/She is personally known to me or has produced identification. Type of identification: _____



Notary Public Signature



Name: Margaret Hill
Commission No: HH242771
Commission Expires: March 21, 2026