

APPLICATION FOR A HARDSHIP VARIANCE
Levy County, Florida

Filing Date: _____
Fee: \$150.00

Petition Number: 01-21
Validation Number: _____

TO THE LEVY COUNTY BOARD OF COUNTY COMMISSIONERS:

This application is hereby made to the Board of County Commissioners of Levy County, Florida pursuant to the provisions of Chapter 163, Florida Statutes, the adopted Levy County Comprehensive Plan and the Levy County Zoning Ordinance petitioning for a Hardship Variance on the following described property. [Source: Levy County Land Development Code, Section 50-852]

I. OWNER/AGENT INFORMATION:
Applicant's Name Amendea Vey Smith + Leslie Vey Owner's Name Same
Address 12151 N.W. 15th Ave Address Same
City Chiefland, FL Zip 32424 City Same Zip Same
Phone Number(s) (727) 277-8551
Name of Person (s) Receiving Care Leslie Vey
Relationship to Applicant/Owner Mother of Applicant / Owner

PARCEL INFORMATION:
Parcel Number (s) 01585040 Section/Township/Range 19/11/15 Acreage 10.00
a. _____
b. _____
Subdivision Name: 10 Total Acreage _____
Subdivision Name: N/A Lot (s) N/A Block N/A

Current Use (Actual) and Improvements on the Property: (i.e. Single family home, well, septic, pole barn, etc....)
Single Family home, well, septic, Run in Pole barn/shelter for horses

Directions to the Property: (Please start directions from a State or County Road):
From S.R. 129 - make (R) on C.R. 321. Travel one quarter mile - property on (R)ght.



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TO BE SUPPLIED AT THE TIME OF SUBMISSION: Attach the items in the order listed below. The application will not be processed without these items. Any information changes must be submitted, in writing to the Development Department and received one week prior to the Board of County Commissioners Public Hearing.

*** Upon completion of the above application, **please submit the original and 8 copies** to the Levy County Development Department, 622 East Hathaway Avenue, Bronson, Florida, for processing.

Property Description

- Property Deed or Tax Certificate:** The most recent one pertaining to the proposed amendment property; obtained from the Clerk of Circuit Court's Office or Tax Collector.
- Detailed Site Plan:** See Section 4 of this application for required information to be shown on the site plan.

Maps:

- Property Appraiser's Parcel Map:** Identify the proposed site clearly using a color or pattern. _____

Documentation:

- Identification:** **Must provide picture ID of the hardship recipient (person receiving care) [Current driver's license]**
- Medical Certification:** Letter obtained by a doctor or by the Florida Department of Health and Rehabilitative Services etc.
- Narrative:** Provide a letter for this application which documents in writing why the requested Hardship Variance is needed and what special conditions exist that justifies the Variance.

- 3. DETAILED SITE PLAN:** Property owner/agent shall submit a site plan of his proposed Hardship Variance to be reviewed by the Board of County Commissioners. The site showing the relationship of the proposed use to the parcel on which it is located. Where a site plan approval is required the following shall be required:

- 1) **Position all existing criteria on the site plan.**
 - A. Dimensions of the entire property and the size of the parcel of land for which a hardship variance is requested, in square feet.
 - B. Name of road fronting property.

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- C. All existing structures, and the distance from such structures to:
 - 1) The property line.
 - 2) The setback lines required for that zoning district.
- D. All locations of any natural or topographical peculiarities. (i.e. sinkholes, water ways, marshland, etc.) [if applicable]
- E. Both the centerline and edge of the right-of-way of adjoining roads or easements. [if applicable]

4. The Applicant states that she/he has read and understands the instructions and submission requirements stated in this application. Approval granted by said Commission in no way constitutes a waiver from any applicable Local, State, or Federal regulation.

I hereby certify that the information contained in this application and its supplements are true and correct, and that I am the legal owner or authorized agent of the above described property.

Applicant/Owner (s) Signature  Date 10/11/20

6. APPLICATION INSTRUCTIONS:

- a. An application for a Hardship Variance must be accompanied by a fee of \$150.00. Please note, application fee may be subject to change. **The filing fee will not be collected and the application will not be processed for a Public Hearing until staff has reviewed the application and found it complete.**
- b. If the applicant is not the owner of record of the property, the owner must agree to this application either by signing the application form, or by submitting a notarized letter authorizing the applicant to act as an agent. **Owner's authorization is required at the time this application is submitted.**
- c. All required documentation and submission material is required to accompany the application at the time the request is submitted. Applications are screened for completeness. Depending on the proposed use, additional information may be required. Failure to provide all information and submission material required shall delay the public review of the application until such time as all materials are received.
- e. The Hardship Variance applications are processed once a month. Applications received by the **first day** of the month will tentatively be scheduled, advertised and presented at a public hearing the following month. Applications received after the **first day** of the month will not be scheduled for the following month.

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f. Applications may be submitted as follows:

In Person: Levy County Zoning Department located on Alternate 27 , within the Levy County Building and Zoning Office.

By Mail: Levy County Zoning Department, Levy County Courthouse, Post Office Box 672, Bronson, Florida, 32621.

g. This office will prepare the poster and place it on the property involved in this request.

h. Abutting property owners will be notified by mail of the request. "Abutting property" is any property immediately adjacent or contiguous to the property which is the subject of this request or located within 300' (three hundred feet) of the subject property lines including, immediately across any road or public right-of-way for said property.

i. It is highly advised that the applicant or representative be present at the Public Hearing by the Board of County Commissioners. The Board, at its discretion, may defer action, or take decisive action, on any application, regardless of attendance by the applicant, owner or representative thereof.

Additional Assistance: If you require further information, please contact the Levy County Zoning Department at (352) 486-5203 or visit the above address in person.

OFFICE USE ONLY:

Board of County Commissioners Public Hearing Date: _____

Board of County Commissioners Action: Approval Denial

Notes, Instructions and Comments:

HARDSHIP VARIANCE
AFFIDAVIT

Hardship Variance No. 01-21

Date _____

PARCEL INFORMATION: Legal Description of Property

Subdivision _____ Unit _____ Lot (s) _____ Block _____
Parcel No. 0158 - 500 - 400 911 Address 12751 N.W. 50th Ave 32626 Section(s) 19
Township 11 Range 15 Net Area of Parcel or Lot (s) 434,934 Acres 10

Mailing Address: 12751 N.W. 50th Ave
Chiefland, FL 32626

I, the property owner {or authorized agent}, understand that if the Hardship Variance that I am applying for is granted, the variance becomes null and void at the time the hardship ceases to exist. {i.e. the person that the hardship variance benefits moves from the property, deceases, or is institutionalized for an indefinite period of time}. I agree to honestly answer and return {mail back} the annual status report in a timely manner. I agree to remove the second {or first} dwelling from the property within sixty (60) days from the time the hardship ceases to exist. I understand that if improvements to the property, such as but not limited to a separate septic tank is involved, that it is a loss I must endure.

I understand that the variance is non-transferable, that any new property owner would not be allowed to assume the variance or keep a second dwelling on their property as "grandfathered-in". I would not be able to sign the variance to any other member of the family not named in the variance, without re-applying and being approved by the Board of County Commissioners.

I Leslie Vey / Amanda Vey; SMITH, on this 14 day of December 20 20, have read, or caused to have read to me, this legal instrument and do hereby agree to the conditions set herein.

Leslie Vey
Owner/Authorized Agent's Signature

STATE OF FLORIDA
COUNTY OF Levy

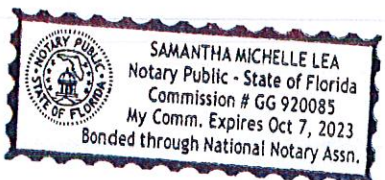
Before me personally appeared Amanda Smith, Leslie Vey to be well known to me, to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that X executed said instrument for the purpose therein expressed.

Witness my hand and official seal this 14 day of December 20 20

Personally known _____ Identification Expiration Date 02/21/2022 / 01/09/2027

Notary Public Samantha M. Lea (Print) Notary Public Samantha Lea (Signature)

My Commission Expires: 10/07/2023



42,500

(2)

Prepared by and Return to Donna Smith,
an employee of First International Title, Inc.
213 Courthouse Square
Inverness, FL 34450
File No.: 160255-51

V R

1830
29750

WARRANTY DEED

This indenture made on March 9, 2020, by **Peter Warner** whose address is: 12600 N Bayshore Dr N., Miami, FL 33181 hereinafter called the "grantor",

to **Leslie Vey and Amanda Vey-Smith as joint tenants with rights of survivorship** whose address is: 205 Dempsey Road, Palm Harbor, FL 34683-5202, hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Levy County, Florida, to-wit:

The East 10 acres of the Southwest 1/4 of the Northeast 1/4 of the Northwest 1/4 of Section 19, Township 11 South, Range 15 East, Levy County, Florida, being more particularly described as follows:

Beginning at the Southeast corner of said Southwest 1/4 of the Northeast 1/4 of the Northwest 1/4 and run South 89° 51' 06" West along the South line of said 10 acres for 657.70 feet; thence run North 00° 03' 05" East parallel to the East line of said fraction for 662.62 feet to the North line of said fraction of a Section; thence run North 89° 53' 29" East along the North line of said Southwest 1/4 of the Northeast 1/4 of the Northwest 1/4 for 657.70 feet to the Northeast corner of said fraction; thence run South 00° 03' 05" West along the East line of said fraction for 662.17 feet to the Point of Beginning.

Together with a 30 foot Easement for ingress, egress and public utilities lying Westerly of the above described lands, over and across the South 30 feet of the North 1/2 of the Northwest 1/4 of said Section 19, Township 11 South, Range 15 East, to Levy County Road C-321 (NW 50th Ave) Levy County, Florida.

Parcel Identification Number: 01585-004-00

The land is not the homestead of the Grantor under the laws and Constitution of the State of Florida and neither the Grantor nor any person(s) for whose support the Grantor is responsible reside on or adjacent to the land.

Subject to all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2019.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

(X) Peter Warner
Peter Warner

Signed, sealed and delivered in our presence:

Witness
[Signature]
1st Witness Signature

Witness
[Signature]
2nd Witness Signature

Print Name: GUERLIN JEAN-NOEL

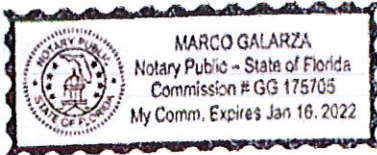
Print Name: Zacharie Anouas

State of FLORIDA
County of MONTESSA

The Foregoing Instrument Was Acknowledged before me by means of physical presence or online notarization on 3/3/2020, by **Peter Warner**, who is/are personally known to me or who has/have produced a valid FUDG as identification.

[Signature]
Notary Public
Printed Name: Marco Galarza
My Commission expires: Jan 16/2022

(Seal)



HONORABLE LINDA FUGATE
REAL ESTATE

LEVY COUNTY

COUNT NUMBER: 01585-004-00 2020

ASSESSED VALUE: 3,200

EXEMPTIONS: * NONE *

TAX DISTRICT: SR

TAXABLE VALUE: 3,200

TAXING AUTHORITY	MILLAGE RATE	EXEMPTIONS	TAXABLE VALUE	TAXES
COUNTY BOARD OF CO COMMISSIONERS		9.0000	3,200	0
SCHOOL SCHOOL - STATE		3.7390	3,200	0
SCHOOL SCHOOL - LOCAL		1.5000	3,200	0
SCHOOL-SCHOOL-BASIC DISC		.7480	3,200	0
WATER SR WATER MGT DIST		.3696	3,200	0

15.35660 49.13

LEVYING AUTHORITY

PURPOSE

RATES/BASIS

AMOUNT

NON AD VALOREM ASSESSMENTS: 0.00

COMBINED TAXES & ASSESSMENTS TOTAL: 49.13

12751 NW 50 AVE CHI

PROPERTY:

ADDR:12751 NW 50 AVE CHI

19-11-15 0010.00 ACRES EAST

657.70 FT OF SW1/4 OF NE1/4 OF

NW1/4 OR BOOK 1528 PAGE 44

IF PAID BY: DEC 31, 2020 JAN 31, 2021 FEB 28, 2021 MAR 31, 2021 DELINQUENT ON

PLEASE PAY: 47.66 48.15 48.64 49.13 APRIL 1

HONORABLE LINDA FUGATE

LEVY COUNTY

REAL ESTATE

IF PAID BY: DEC 31, 2020 JAN 31, 2021 FEB 28, 2021 MAR 31, 2021 DELINQUENT ON

PLEASE PAY: 47.66 48.15 48.64 49.13 APRIL 1

HONORABLE LINDA FUGATE

LEVY COUNTY

REAL ESTATE

VALUES AND EXEMPTIONS TAXES 49.13 HONORABLE LINDA FUGATE

ASSESSMENT 3,200 TOTAL 49.13 310 SCHOOL ST

TAXABLE 3,200 BRONSON, FL 32621

12751 NW 50 AVE CHI

19-11-15 0010.00 ACRES EAST

657.70 FT OF SW1/4 OF NE1/4 OF

NW1/4 OR BOOK 1528 PAGE 44

01585-004-00 2020
VEY LESLIE
VEY-SMITH AMANDA
205 DEMPSEY RD
PALM HARBOR, FL 346835202

All pertinent Features shown

North ↑

657.70'

522'

1/4" ≈ 100'

6th Ave C.P. 321

N.H.

662.62'

14' x 76' Perm Mt

Ag structure

septic

14' x 60' Mt (Hardship Variance)

well

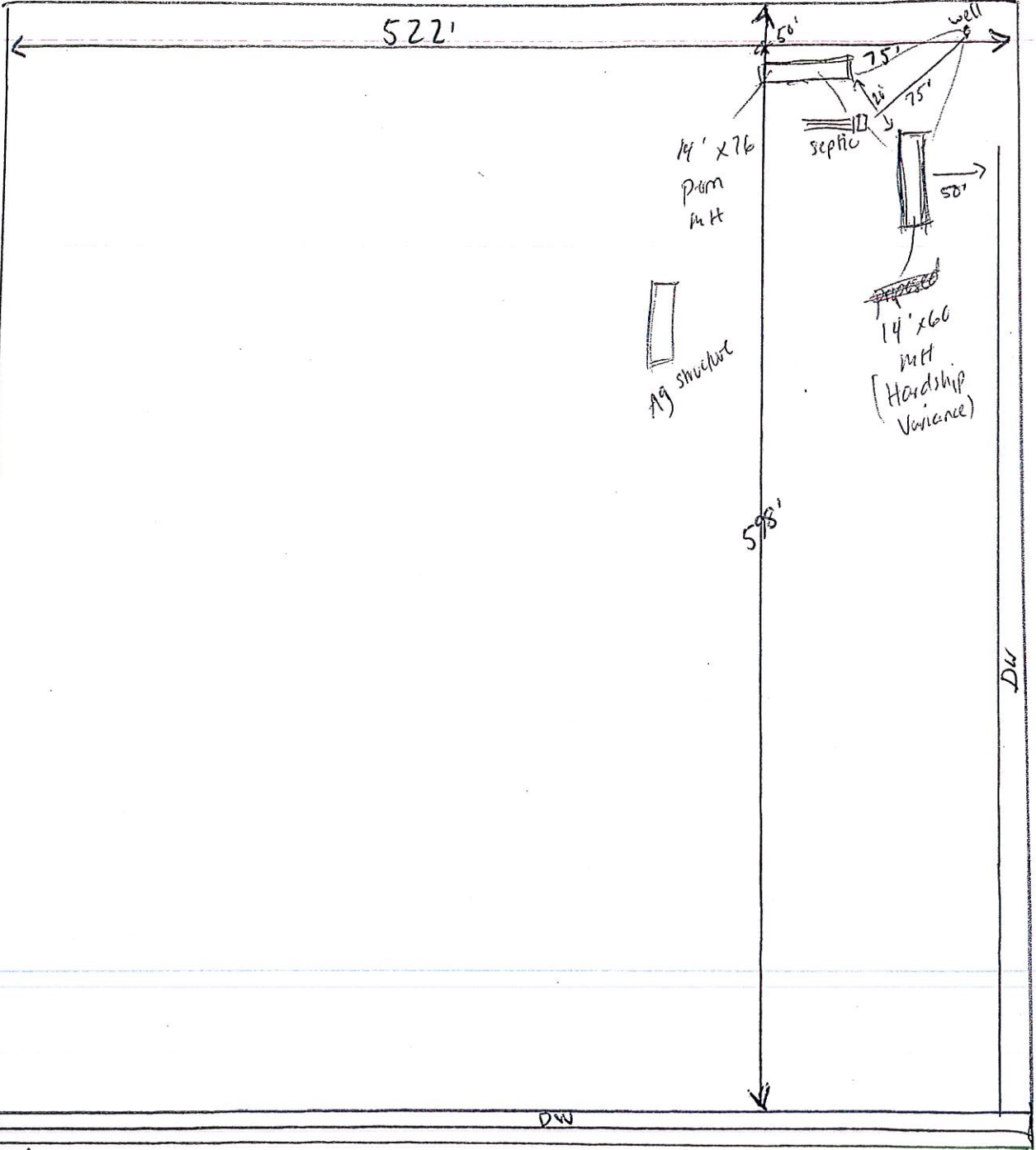
598'

DW

DW 30' Easement

DW

← 1300' →



Florida

DRIVER LICENSE



9 CLASS E



[REDACTED]

1 V EY
2 LESLIE MICHAEL
3 205 DEMPSEY RD LOT 81
PALM HARBOR, FL 34683-5202

7 DOB 01/09/1949 15 SEX F SAFE DRIVER
4B EXP 01/09/2027 16 HGT 5'-03"
12 REST NONE 9a END NONE

4a ISS 03/08/2019
5 CD J701903080200



Leslie M. Vey

Operation of a motor vehicle constitutes consent to any sobriety test required by law



21 0100384690618345

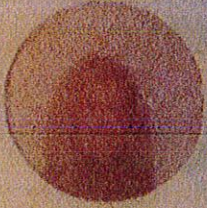


REST: None

END: None

CLASS: E - Any non-commercial veh with a GVWR < 26,001 lbs. or any RV

The state of FL retains all property rights herein.



01/09/10-19



Amanda Vey- Smith
Leslie Ann Vey
12751 N.W. 50th Avenue
Chiefland, FL 32626
727-277-8551
absmith87@outlook.com

December 10, 2020

Levy County Building Dept

% Mrs. Grace Romero
P.O. Box 672
Bronson, FL 32621

Levy County Board of County Commissioners

% Commissioners: Mr. John Meeks, Mr. Rock Meeks, Mr. Mike Joyner, Ms. Lilly Rooks, & Mr. Matt Brooks
310 School St,
Bronson, FL 32621

Ref: Levy County Medical Hardship Variance

Dear Mrs. Romero & Honorable Commissioners,

My mother, Leslie Vey and I, humbly petition this department for a passthrough of this request to the board of county commissioner, and to the board for an approval of (medical) hardship variance at the property described herein. This petition comes based on a promise made many years ago, right here in this very county.

As an only, late-in-life child, my mother (who endured a stroke while giving birth to me) is and has been my world. As a single mother- she raised me to believe in God, to work hard no matter the payoff, to stand for what was right and good, and to always stay true to my word. She also taught me to never make a promise I couldn't keep. The promise I made to her, specifically, was that, when the time came, I would never place her in a nursing home or assisted living facility- but would live with her to help take care of her in age and ailing health. Even as a child- I wholeheartedly believed in taking care of your elders; when they've taught *you* how to use a spoon- the gesture should come full circle. But, upon jointly purchasing the 10 acre property at 12751 N.W. 50th Avenue, in Chiefland, it was made known to us that without your approval, when that time came, I may not be able to keep my promise in any other way but under the same roof.

I digress. As it stands, my mother is in her 70's, and while her health conditions have been manageable in previous years, they have recently become more overwhelming, and more frightening. Aside from age, near fatal AFib attacks, compounded by a Mitral Valve Prolapse (a genetic heart condition) present rapidly, when immediate assistance and intervention with medications, or even an able body to place a phone call to an emergency line, can be crucial to survival. Chronic vertigo, that sadly doesn't seem to respond to treatment, makes slip-and- falls all too common- and mobility alone far less fluid than it used to be. Other conditions such as

high blood pressure, COPD with rescue inhaler, and insulin controlled diabetes complete the list. As you can see, and in accordance with the hand-written recommendation from my mother's primary care physician, the time has come.

With *all* that being said- while my sentiments of taking care of my mother have never waived, with maturity, they have taken a slightly different shape. As a wife, with two children of my own- I've come to realize (and my mother agrees) that it isn't necessarily feasible for three adults and two children to live comfortably, or "normally," in ONE home. We have been blessed enough to own two separate, livable dwellings (a 2 bedroom, and a 3 bedroom) that can be affixed (within and per the county setback requirements,) so that we may be close enough to one another for me to offer adequate daily care and keep watch over my mother, as God intended. I simply ask you to allow me to keep my promise in a way conducive to maintaining normalcy for all. We look forward to speaking with you.

Sincerely,

Amanda Vey- Smith
and
Leslie Vey

Attn:

Mrs. Grace Romero, Levy County Building Department

The Honorable Levy County Board of County Commissioners

(Cont. Ref: Vey Hardship Variance, Simplified)

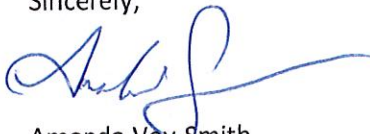
December 10, 2020

To Whom It May Concern:

The intent for request of hardship variance at 12751 N.W. 50th Avenue, Chiefland, FL, 32626, is to help take care of an aging and ailing parent.

The proposed variance would consist of placing a 1990, Wind Zone II, 3 bedroom, 2 bathroom, 14'x76' mobile home on the above 10 acre property- affixed by tie down on a pier and beam foundation, at a complimentary 90 degree angle to the existing residence (to allow ease of access and alleviate any unsightliness,) all within the county required setbacks and recommended dwelling spacing. The home would be on a separate utility meter- with shared well and septic (both have been approved, in size and location, to accommodate the load increase and attachment, as specified in this request.) We genuinely thank you for your consideration of this matter.

Sincerely,



Amanda Vey-Smith

Leslie Ann Vey

727-277-8551

absmith8&&@outlook.com

CHIEFLAND MEDICAL CENTER, LLC
1113 NW 23rd Ave
Chiefland, Florida 32626
Tel: 352-493-9500 • Fax: 866-895-8359

Elizabeth Burkett, DO
DEA #: BB4168933
 Gar Rexroat, PA-C
DEA #: MR4232776
LIC #: PA1669
 Anthony Tocco, DPM
DEA #: AT4970415
NONACUTE PAIN
ACUTE PAIN EXCEPTION

Martha Harmon, ARNP
DEA #: MH4178148
Lic. #: ARNP 975372
 Barbara Williams, ARNP
DEA #: MW4291580

FileRx.com: 800-307-7717 RxPads.com
Order # 2935426-1
RX_2_Flurb_H

Name: *Leslie Vey* DOB: *11/23/20*
Address: Date: *11/23/20*

R
*Mrs Vey would be picked from
her daughter staying on her page
from a medical standpoint*

SIGNATURE: *[Signature]* LICENSURE

		LABEL <input type="checkbox"/>	NO SUBSTITUTION <input type="checkbox"/>				
Refill	NR	1	2	3	4	5	

SAFETY FEATURES: COLORED VOID BACKGROUND • MICROPRINT LINES • IMPRINT ERASURE PROTECTION
REVERSE RX • THERMOCHROMIC INK • ON BACK: ARTIFICIAL WATERMARK • COIN REACTIVE INK

SCRIPT# 8237