

APPLICATION FOR A HARDSHIP VARIANCE
Levy County, Florida

Filing Date: 10-30-20
Fee: \$150.00

Petition Number: 03-20
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:

x William H. Rain Jr

Applicant's Name Angela G. Rain Owner's Name Angela G. Rain
Address 17491 NW 1st Ave Address 17491 NW 1st Ave
City Trenton Zip 32693 City Trenton Zip 32693

Phone Number(s) (352) 283-2485
Name of Person (s) Receiving Care Angela + William Rain
Relationship to Applicant/Owner Self

I. PARCEL INFORMATION:

Parcel Number (s)	Section/Township/Range	Acreage
a. <u>21049-000-00</u>	<u>26-10-15</u>	<u>Sacred (4.76)</u>
b. _____	_____	_____
Total Acreage		<u>4.76</u>
Subdivision Name: <u>Shady lane</u>	Lot (s) <u>1</u>	Block _____

Current Use (Actual) and Improvements on the Property: (i.e. Single family home, well, septic, pole barn, etc....)
Single family home, well, septic, power pole, shed

Directions to the Property: (Please start directions from a State or County Road):

Come down 339 from Bronson, turn right down
NW 172nd lane, go down and turn left on
NW 1st Ave, the property is the last house on the
right.

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2. **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 Angela H Rain Date 10-30-20
X William H Rain

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. _____

Date 10-30-20

PARCEL INFORMATION: Legal Description of Property

Subdivision 21049-000-00 Unit _____ Lot (s) 1 Block _____
Parcel No. Snody Lane - 911 Address 17491 NW 1st Ave Section(s) 26
Township 10 Range 15 Net Area of Parcel or Lot (s) 1 Acres 4.76

Mailing Address: 17491 NW 1st Ave
Trenton, FL 32693

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 assign 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 ANGELA G. RAIN, on this 30, day of October 20 20,
have read, or caused to have read to me, this legal instrument and do hereby agree to the conditions set herein.

Angela G Rain
Owner/Authorized Agent's Signature

STATE OF FLORIDA
COUNTY OF Levy

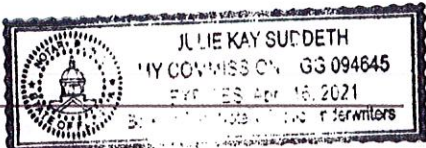
Before me personally appeared Angela Rain to be well known to me, to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that _____ executed said instrument for the purpose therein expressed.

Witness my hand and official seal this 30 day of October 2020.

Personally known _____ Identification Expiration Date FL DL exp 8/23/27

Notary Public Julie Suddeth
(Print)

Notary Public Julie Suddeth
(Signature)



My Commission Expires: _____



TAXING AUTHORITY TAX INFORMATION								
REAL ESTATE	LAST YEAR'S TAXABLE VALUE (2018)	YOUR FINAL TAX RATE AND TAXES LAST YEAR (2018)		CURRENT TAXABLE VALUE (2019)	YOUR TAX RATE AND TAXES THIS YEAR IF NO BUDGET CHANGE IS MADE (2019)		YOUR TAX RATE AND TAXES THIS YEAR IF PROPOSED BUDGET CHANGE IS MADE (2019)	
Taxing Authority	COLUMN 1	COLUMN 2		COLUMN 3	COLUMN 4		COLUMN 5	
		MILLAGE RATE	TAXES		MILLAGE RATE	TAXES	MILLAGE RATE	TAXES
COUNTY:								
COUNTY	43,242	9.000000	389.18	45,033	8.772500	395.05	9.000000	405.30
PUBLIC SCHOOLS:								
SCHOOL STATE	68,242	4.079000	278.36	70,033	3.947300	276.44	3.864000	270.61
SCHOOL LOCAL	68,242	2.248000	153.41	70,033	2.175400	152.35	2.248000	157.43
MUNICIPAL:								
	0	0.000000	0.00	0	0.000000	0.00	0.000000	0.00
WATER MGMT DIST:								
SUWANNEE RIVER WT	43,242	0.394800	17.07	45,033	0.384000	17.29	0.384000	17.29
	0	0.000000	0.00	0	0.000000	0.00	0.000000	0.00
	0	0.000000	0.00	0	0.000000	0.00	0.000000	0.00
TOTAL AD-VALOREM PROPERTY TAXES			838.02			841.13		850.63

PROPERTY APPRAISER VALUE INFORMATION								
	COUNTY		PUBLIC SCHOOLS		MUNICIPAL		WATER MGMT DIST	
	2018	2019	2018	2019	2018	2019	2018	2019
MARKET VALUE	117,451	125,125	117,451	125,125	0	0	117,451	125,125
LESS APPLIED ASSESSMENT REDUCTIONS								
Save Our Homes Benefit	23,209	29,092	23,209	29,092	0	0	23,209	29,092
Non-Homestead Benefit	0	0	0	0	0	0	0	0
Ag Class Benefit	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
ASSESSED VALUE	94,242	96,033	94,242	96,033	0	0	94,242	96,033
LESS EXEMPTIONS								
First Homestead	25,000	25,000	25,000	25,000	0	0	25,000	25,000
Add'l Homestead	25,000	25,000	0	0	0	0	25,000	25,000
Senior Exemption	0	0	0	0	0	0	0	0
Veteran's Exemption	0	0	0	0	0	0	0	0
Other Exemptions	1,000	1,000	1,000	1,000	0	0	1,000	1,000
TAXABLE VALUE	43,242	45,033	68,242	70,033	0	0	43,242	45,033

IF YOU FEEL THAT THE MARKET VALUE OF YOUR PROPERTY IS INACCURATE OR DOES NOT REFLECT FAIR MARKET VALUE ON JANUARY 1, 2019, OR IF YOU ARE ENTITLED TO AN EXEMPTION THAT IS NOT REFLECTED ABOVE, CONTACT YOUR COUNTY PROPERTY APPRAISER AT:

Levy County Property Appraiser PO Box 100 Bronson, FL 32621 352-486-5222 info@levypa.com

IF THE PROPERTY APPRAISER'S OFFICE IS UNABLE TO RESOLVE THE MATTER AS TO MARKET VALUE OR AN EXEMPTION, YOU MAY FILE A PETITION FOR ADJUSTMENT WITH THE VALUE ADJUSTMENT BOARD. PETITION FORMS ARE AVAILABLE FROM THE COUNTY PROPERTY APPRAISER AND **MUST BE FILED WITH THE CLERK OF COURT NO LATER THAN**

Tax Roll Property Summary

[Click here for help](#)

Account Number	21049-000-00	Type	REAL ESTATE
Address	17491 NW 1 AVE TRE	Status	
Sec/Twn/Rng		Subdivision	

Year	Roll	Account Number	Status	Date Paid	Amount Paid	Balance Due
2005	R	2005 21049-000-00	PAID	05/2006	366.01	Tax Bill
2006	R	2006 21049-000-00	PAID	12/2006	592.74	Tax Bill
2007	R	2007 21049-000-00	PAID	12/2007	2,153.33	Tax Bill
2008	R	2008 21049-000-00	PAID	12/2008	2,165.09	Tax Bill
2009	R	2009 21049-000-00	PAID	12/2009	1,457.22	Tax Bill
2010	R	2010 21049-000-00	PAID	11/2010	1,359.28	Tax Bill
2011	R	2011 21049-000-00	PAID	12/2011	1,170.91	Tax Bill
2012	R	2012 21049-000-00	PAID	12/2012	1,028.02	Tax Bill
2013	R	2013 21049-000-00	PAID	12/2013	1,042.39	Tax Bill
2014	R	2014 21049-000-00	PAID	11/2014	982.80	Tax Bill
2015	R	2015 21049-000-00	PAID	11/2015	991.02	Tax Bill
2016	R	2016 21049-000-00	PAID	11/2016	1,006.28	Tax Bill
2017	R	2017 21049-000-00	PAID	11/2017	991.34	Tax Bill
2018	R	2018 21049-000-00	PAID	11/2018	1,153.94	Tax Bill
2019	R	2019 21049-000-00	PAID	11/2019	1,166.04	Tax Bill
Year	Roll	Account Number	Status	Date Paid	Amount Paid	Balance Due

CURRENT ACCOUNT DETAILS

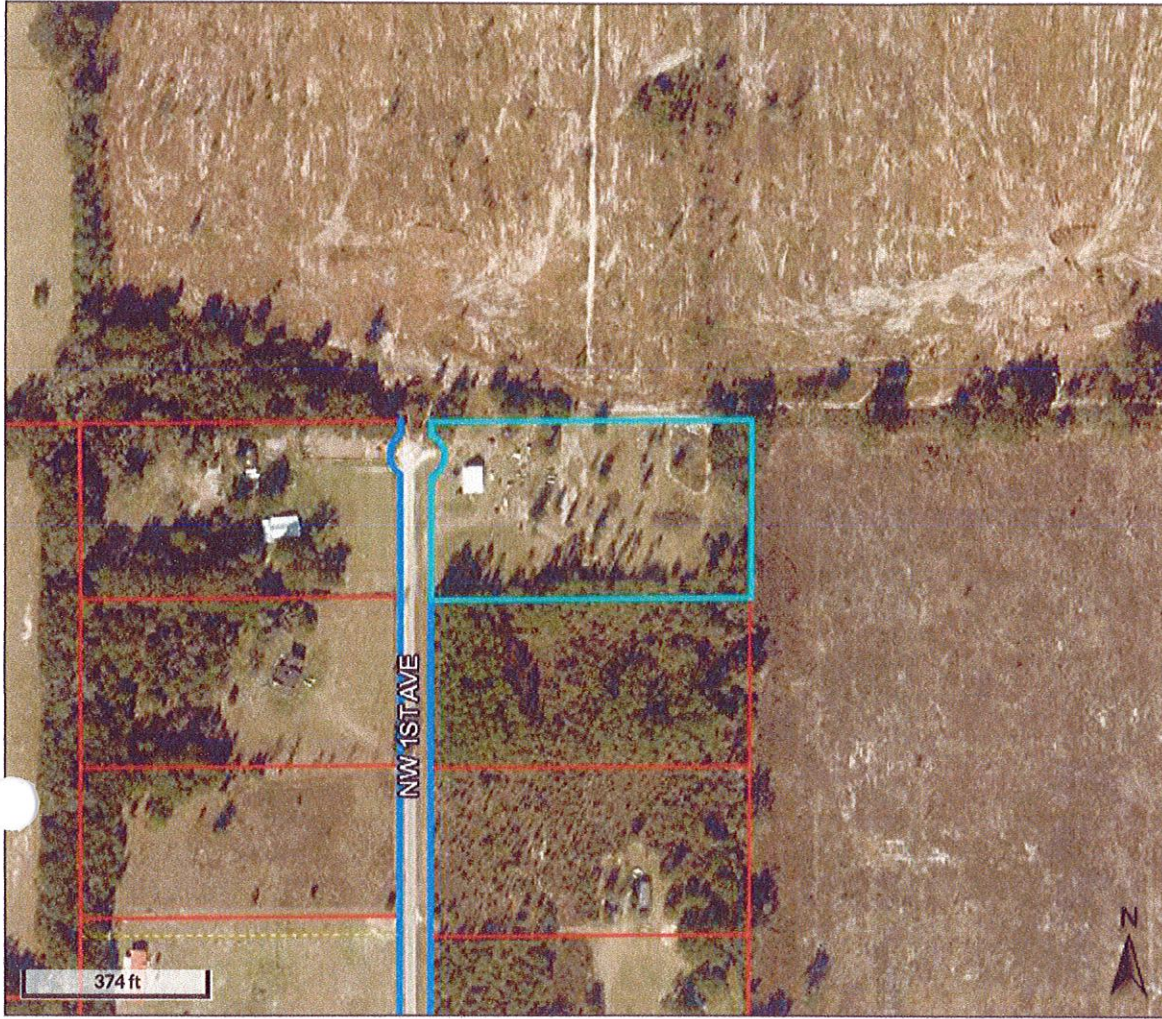
Account Number	2019	2104900000	Tax Bill
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Property Description		Owner Information				
26-10-15 SHADY LANE S/D LOT 1 (4 .76 AC) OR BOOK 945 PAGE 691		RAIN WILLIAM H RAIN ANGELA G 17491 NW 1ST AVE TRENTON,FL 32693				
Current Values and Exemptions		Taxes and Fees Levied				
ASSESSMENT	96,033	TAXES	1,214.63			
TAXABLE	45,033	TOTAL	1,214.63			
HX WATER	51,000					
NON VET	1,000					
HX BAND	25,000					
HOMESTD	25,000					
IF PAID BY:	DEC 16, 2019	DEC 31, 2019	JAN 31, 2020			
PLEASE PAY:	1,166.04	1,178.19	1,190.34			
			FEB 29, 2020			
			MAR 31, 2020			
			1,202.48			
			1,214.63			
Post Date	Receipt #	Pmt Type	Status	Disc	Interest	Total

11/20/2019	997	2019	000018	000 Full	Pmt Posted	\$48.	\$.00	\$1,166.04
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Links of Interest

[LINK TO PROPERTY APPRAISER](#)



Overview




Legend

- Parcels
- Parcel Lines**
- <all other values>
- Construction
- Easement
- Lot
- Miscellaneous
- Parcel
- Private Road
- Road Right of Way
- Subdivision
- Water
- Roads**
- City Labels**

Parcel ID	2104900000	Physical Address	17491 NW 1 AVE TRENTON	Building Value	\$104,361	Last 2 Sales							
Property Use	0100 - HOUSE	Mailing Address	RAIN WILLIAM H 17491 NW 1ST AVE TRENTON FL 32693	Extra Feature Value	\$1,877	Date	5/1/2005	Price	\$35000	Reason	n/a	Qual	Q
Taxing District	SUWANNEE RIVER WT			Market Land Value	\$23,491	5/1/2005	\$17600	35				U	
Acres	4.76			Ag Land Value	\$23,491								
				Just Value	\$129,729								
				Assessed Value	\$98,242								
				Taxable Value	\$47,242								

Date created: 10/28/2020
Last Data Uploaded: 10/27/2020 7:24:15 PM

Florida DRIVER LICENSE  CLASS E



ANGELA GALE
17491 NW 1ST AVE
TRENTON, FL 32693


DOB: 08/23/1965 SEX: F
EXP: 08/23/2027 HGT: 5'-04"
REST: NONE END: NONE

SAFE DRIVER
ISS: 05/29/2020
D762005290028

Angela Gale

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



Florida DRIVER LICENSE  CLASS E



WILLIAM HERBERT JR
17491 NW 1ST AVE
TRENTON, FL 32693

DOB: 06/20/1959 SEX: M
EXP: 06/20/2027 HGT: 5'-11"
REST: A END: NONE

ISS: 05/31/2019
D741905310004

William Herbert Jr

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





UNIVERSITY OF FLORIDA

College of Medicine
Department of Community Health and Family Medicine
Medical Student Education Office
<http://www.med.ufl.edu/chfm/>

PO Box 100222
Gainesville, Florida 32610-0222
Tele: (352) 273-5157
Fax: (352) 392-7349

October 30, 2020

To Whom It May Concern,

I have been William and Angie Rain's primary care physician for over 20 years and know both of them very well. Both have serious medical conditions. Mr. Rain has an artificial heart valve that makes him prone to having a serious stroke. Despite being on blood thinners to prevent a stroke, he has still had a mild one, which forced us to make his blood even thinner. He also has had a kidney removed because of cancer. Angie has systemic lupus erythematosus (a condition where her immune system attacks her own body) as well as cancer (lymphoma which is currently in remission). She has also had a seizure in the past is prone to having another. Over the last 10 years, there have been several times when their medical conditions worsened and they were overwhelmed and needed extra assistance. Both of them are prone to sudden worsening of their conditions as well as medical emergencies.

It would be very beneficial to them medically if they could be granted an exemption to allow other family members to live on their property so that they can be immediately available in the event of an emergency and also to have them nearby to provide daily assistance in the event it becomes necessary. It is highly likely that they will need either emergency help or daily assistance at some point in the not too distant future, so I believe this exemption is medically necessary. The Rains and I would greatly appreciate it if you would grant this exemption.

Thank you,

A handwritten signature in black ink, appearing to read "R. Hatch".

Robert L. Hatch, M.D., M.P.H.

Oct 30, 2020

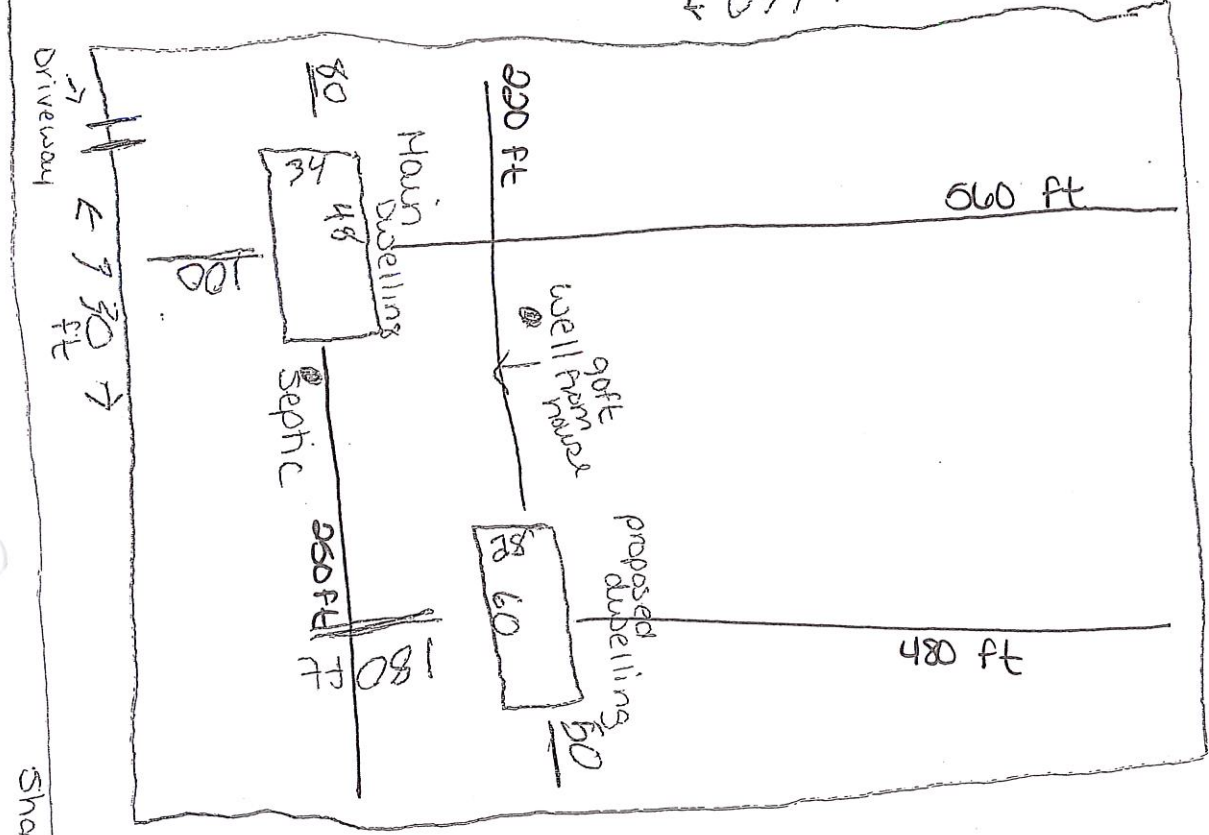
To Whom it may concern:

Both myself and my husband are 100% disabled. Both of our health is deteriorating rapidly. We need daily assistance in caring for ourselves. My husband "William Rain" has a mechanical valve to his heart and has had a couple of strokes. I have Systemic Lupus, high blood pressure, seizures and diabetes. The Lupus is currently attacking my kidneys. We both need our son and his wife to live on our property to help us with our daily activities. We would greatly appreciate you approving this hardship request

Thank You
Angela (Angie) Rain



← 660 →



Main Home - 34x48
 Proposed Home - 28x60

Landria Rain
 11-19-20

Shady lane road

-MUD 1st ave