

SEMINOLE COUNTY GOVERNMENT  
BOARD OF ADJUSTMENT  
AGENDA MEMORANDUM

**SUBJECT:** 4947 Cains Wren Trail – Valerie & James Lettieri, applicants; Request for a (1) rear yard setback variance from 10 feet to 2 feet for a proposed pool and (2) rear yard setback variance from 5 feet to 0 feet for a pool screen enclosure in PUD (Planned Unit Development District).

**DEPARTMENT:** Planning & Development **DIVISION:** Planning

**AUTHORIZED BY:** Kathy Fall **CONTACT:** Kathy Fall **EXT.** 7433

Agenda Date 3/24/08 Regular  Consent  Public Hearing – 6:00

**MOTION/RECOMMENDATION:**

1. **Deny** the request for a (1) rear yard setback variance from 10 feet to 2 feet for a proposed pool and (2) rear yard setback variance from 5 feet to 0 feet for a pool screen enclosure in PUD (Planned Unit Development District); or
2. **Approve** the request for a (1) rear yard setback variance from 10 feet to 2 feet for a proposed pool and (2) rear yard setback variance from 5 feet to 0 feet for a pool screen enclosure in PUD (Planned Unit Development District); or
3. **Continue** the request to a time and date certain.

<b>GENERAL INFORMATION</b>	Applicant: Location: Zoning: Subdivision:	Valerie & James Lettieri 4947 Cains Wren Trail PUD Preserve at Astor Farms
<b>BACKGROUND / REQUEST</b>	<ul style="list-style-type: none"> <li>• The applicants propose to construct a pool and associated screen enclosure that will encroach into the rear yard setback.</li> <li>• The applicant's rear property line abuts a open space tract.</li> <li>• There are currently no code enforcement or building violations for this property.</li> <li>• There is no record of prior variances for this property.</li> </ul>	

<b>STAFF FINDINGS</b>	<p>The applicant has not satisfied the criteria for the grant of a variance. Staff has determined that:</p> <ul style="list-style-type: none"><li>• No special conditions or circumstances exist, which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures or building in the same zoning district.</li><li>• Special conditions and circumstances result from the actions of the applicant.</li><li>• The granting of the variance requested would confer on the applicant special privileges that are denied by Chapter 30 to other lands, buildings, or structures in the same zoning district.</li><li>• The literal interpretation of the provisions of Chapter 30 would not deprive the applicant of rights commonly enjoyed by other properties in the same zoning classification.</li><li>• The variance requested is not the minimum variance that will make possible reasonable use of the land, building or structure.</li><li>• The applicant would still retain reasonable use of the land, building or structure without the granting of the variance.</li><li>• The grant of the variance would not be in harmony with the general intent of Chapter 30.</li></ul>
<b>STAFF RECOMMENDATION</b>	<p>Based on the stated findings, staff recommends denial of the request, unless the applicants can demonstrate a hardship. If the Board should decide to grant a variance, staff recommends the following conditions of approval:</p> <ul style="list-style-type: none"><li>• Any variance granted shall apply only to the proposed pool and screen enclosure as depicted on the attached site plan; and</li><li>• Any additional condition(s) deemed appropriate by the Board, based on information presented at the public hearing.</li></ul>

**INDEX OF ATTACHMENTS**

*Items that are checked are included in the packet*

- Staff Report
- Application
- Applicant statement of request
- Proposed Site Plan
- Location map
- Property Appraiser data sheet
- PUD Commitment Card, *if applicable*

**Support information:**

- Proposed elevation drawings, renderings, floor plans, etc
- Aerials, *if warranted*
- Plat, *if warranted*
- Code Enforcement information
- Building Permit information
- Correspondence
- Authorization letter
- Applicant Authorization Form
- Supporting documentation
- Letters of support
- HOA approval letter
- Pictures provided by applicant
- Other miscellaneous documents
  
- Proposed Development Order

Fee: \$150.00 plus \$50.00 for each additional variance

**COPY**

Application # BU 2009-2  
Meeting Date \_\_\_\_\_



**VARIANCE APPLICATION**  
**SEMINOLE COUNTY PLANNING DIVISION**  
1101 East First Street Sanford FL 32771 (407) 665-7444

PROPERTY OWNER / APPLICANT (If you are not the owner please provide a letter of authorization from the owner)

Name: Valerie Lettieri + James Lettieri  
Address: 4947 CAINS Wren Trail City: SANFORD Zip code: 32771  
Project Address: 4947 CAINS Wren Trail City: SANFORD Zip code: 32771  
Contact number(s): 407-330-0661  
Email address: vtalmadge@aol.com

Is the property available for inspection without an appointment?  Yes  No

What type of structure is this request for?	
<input type="checkbox"/> Shed	Please describe:
<input type="checkbox"/> Fence	Please describe:
<input checked="" type="checkbox"/> Pool	Please describe:
<input checked="" type="checkbox"/> Pool screen enclosure	Please describe:
<input type="checkbox"/> Addition	Please describe:
<input type="checkbox"/> New Single Family Home	Please describe:
<input type="checkbox"/> Other	Please describe:
<input type="checkbox"/> This request is for a structure that has already been built.	

What are the variance requests?				
<input type="checkbox"/> Minimum lot size	Required lot size:		Actual lot size:	
<input type="checkbox"/> Width at the building line	Required lot width:		Actual lot width:	
<input type="checkbox"/> Front yard setback	Required setback:		Proposed setback:	
<input checked="" type="checkbox"/> Rear yard setback	Required setback:	<u>10 ft.</u>	Proposed setback:	<u>2 ft. Pool</u>
<input type="checkbox"/> Side yard setback	Required setback:		Proposed setback:	
<input type="checkbox"/> Side street setback	Required setback:		Proposed setback:	
<input type="checkbox"/> Fence height	Required height:		Proposed height:	
<input type="checkbox"/> Building height	Required height:		Proposed height:	

Use below for additional yard setback variance requests:				
<input checked="" type="checkbox"/> <u>Rear</u> yard setback	Required setback:	<u>5 ft.</u>	Proposed setback:	<u>0</u>
<input type="checkbox"/> _____ yard setback	Required setback:		Proposed setback:	

Pool screen Enclosure

Total number of variances requested 2

NO APPLICATION WILL BE ACCEPTED AND/OR SCHEDULED unless all of the information in the Variance application and submittal checklist are provided to the planning division.

Signed: Valerie Lettieri

**FOR OFFICE USE ONLY**

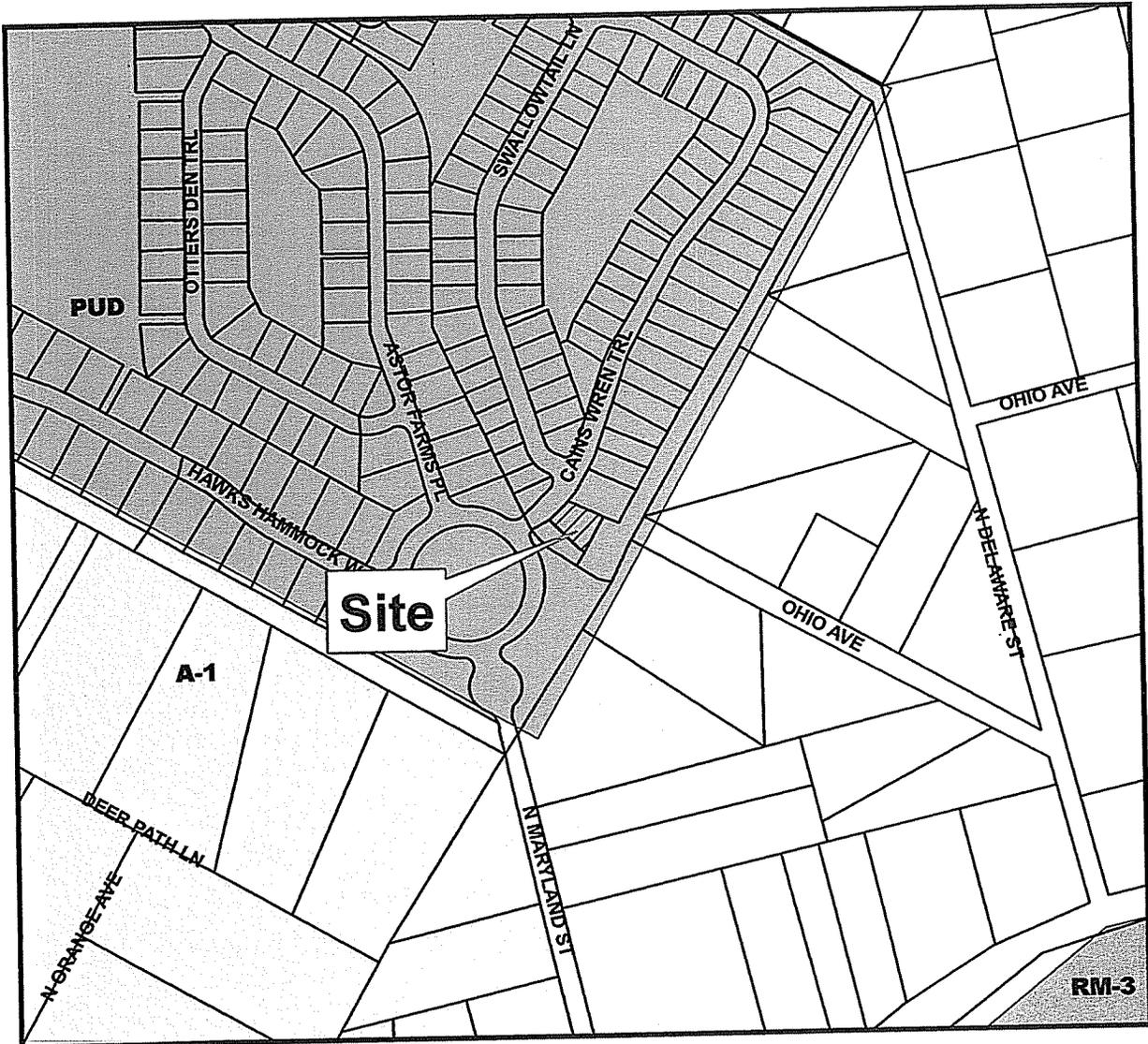
Date Submitted: 2-20-08 Reviewed By: P. Johnson  
 Tax parcel number: 18-19-30-SRS-0000-2410 Zoning/FLU PUD/PO  
 Legally created parcel (1971 tax roll, 5-acre dev, lot split)  
 Platted Lot (check easements as shown on lots, in notes or in dedication)  
 Lot size \_\_\_\_\_  Meets minimum size and width  
 Application and checklist complete  
 Notes: check D.O. for restrictions

**VARIANCE SUBMITTAL CHECKLIST**

*Please return this checklist with your application!*

<p><i>After the application is reviewed by staff for completeness, any items required that were not provided at the time of the application will be check marked below. These must be provided prior to scheduling of the Board of Adjustment hearing.</i></p>	
	1. Completed application.
	2. Owner's authorization letter (if needed). <i>This form can be obtained at <a href="http://www.seminolecountyfl.gov/pd/planning/forms.asp">http://www.seminolecountyfl.gov/pd/planning/forms.asp</a></i>
	3. Provide a legible 8 1/2 x 11 inch site plan with the following information <b>NOTE: Please use your property survey for your site plan, if available.</b> <b>See the attached site plan as an example of the information needed; please draw to scale and note the scale used on the plan.</b>
	<input type="checkbox"/> Please start with a clean survey (ex: white out old approval stamps)
	<input type="checkbox"/> Size and dimension of the parcel
	<input type="checkbox"/> Location and name of all abutting streets
	<input type="checkbox"/> Location of driveways
	<input type="checkbox"/> Location, size and type of any septic systems, drainfield and wells
	<input type="checkbox"/> Location of all easements
	<input type="checkbox"/> Existing or proposed house or addition <i>(Label existing, label proposed, and include square footage and dimensions of each)</i>
	<input type="checkbox"/> Existing and/or proposed buildings, structures and improvements <i>(Label existing, label proposed, and include square footage and dimension of each)</i>
	<input type="checkbox"/> Building height
	<input type="checkbox"/> Setbacks from each building to the property lines
	<input type="checkbox"/> Location of proposed fence(s)
	<input type="checkbox"/> Identification of available utilities <i>(ex: water, sewer, well or septic)</i>
	4. Attach additional information and supporting documents such as letters of support from adjacent property owners or Home Owners Association DRB approvals, as desired.

Valerie and James Lettieri  
4947 Cains Wren Trail  
Sanford, Florida 32771

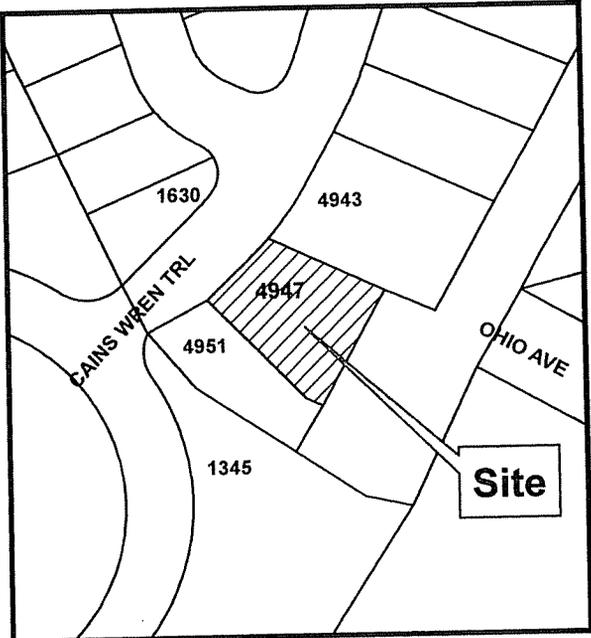


Seminole County Board of Adjustment  
March 24, 2008  
Case: BV2008-20 (Map 2999, Grid B4)  
Parcel No: 18-19-30-5RS-0000-2410

**Zoning**

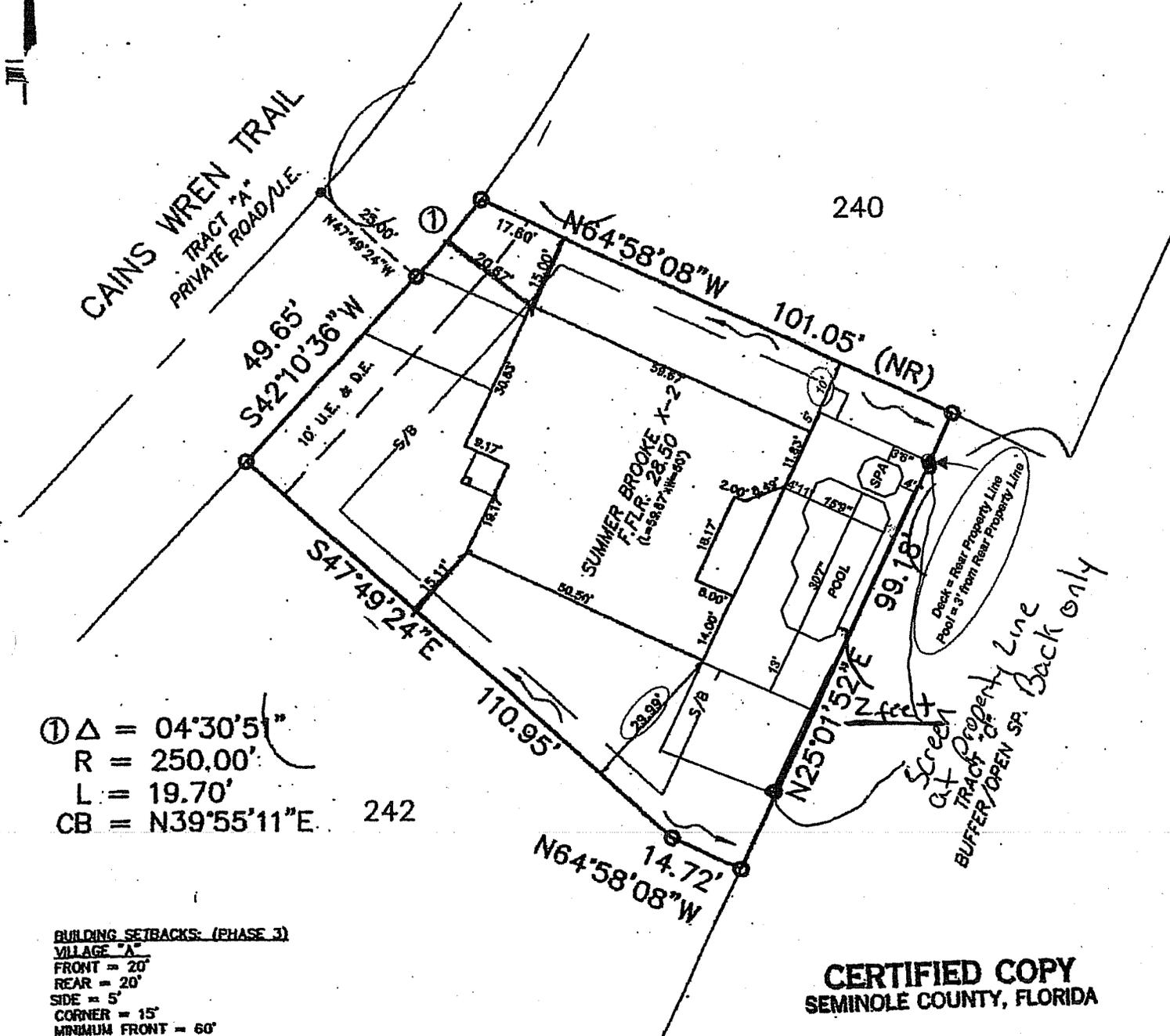
-  BV2008-20
-  A-1
-  RM-3
-  PUD

N  

# PRESERVE AT ASTOR FARMS, PHASE 3

ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 66 ON PAGES 40, 41, 42 & 43 OF THE PUBLIC RECORDS OF SEMINOLE COUNTY, FLORIDA,



240

242

① Δ = 04°30'51"  
 R = 250.00'  
 L = 19.70'  
 CB = N39°55'11"E

**BUILDING SETBACKS: (PHASE 3)**  
 VILLAGE "A"  
 FRONT = 20'  
 REAR = 20'  
 SIDE = 5'  
 CORNER = 15'  
 MINIMUM FRONT = 60'  
 70' FOR CORNER LOTS  
**POOL SETBACKS:**  
 POOL-WATER = 10' SIDE/REAR  
 SCREEN = 5' SIDE/REAR

**MODEL OPTIONS:**  
 SITTING ROOM  
 SUITE 5 (INT)  
 2-CAR FRONT ENTRY GARAGE/STUDY

**CERTIFIED COPY**  
 SEMINOLE COUNTY, FLORIDA

LOT DRAINAGE TYPE "A-MOD"

**NOTES:**  
 ROOF OVERHANGS & FOOTERS HAVE NOT BEEN LOCATED  
 NO UNDERGROUND IMPROVEMENTS HAVE BEEN LOCATED.  
 BUILDING TIES ARE NOT TO BE USED TO CONSTRUCT DEED OR PLATTED LINES  
 THE LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, RIGHTS OF WAY, RESTRICTIONS, USES, INTERESTS OR MATTERS OF RECORD BY THIS FIRM

	TOTAL LOT AREA	9,584	SQ.FT. (+/-)
FLATWORK On Lot/Off Lot=TOTAL			SQ.FT. (+/-)
DRIVE	395/208=603		SQ.FT. (+/-)
WALKS	51/213=264		SQ.FT. (+/-)
FLATWORK			SQ.FT. (+/-)
FOUNDATION/PAD	2,644		SQ.FT. (+/-)
REAR PATIO	163		SQ.FT. (+/-)
FRONT PORCH DECK	45		SQ.FT. (+/-)
CONC	8,288		SQ.FT. (+/-)

NOTE: INSTALLED LANDSCAPING SHALL COMPLY WITH APPLICABLE CONDITIONS OF THE ASTOR FARMS PUD.

- - INDICATES 18" - 5/8" REBAR/CAP (LB 6) UNLESS NOTED OTHERWISE
- - INDICATES PERMANENT CONTROL POINT
- - INDICATES CONC. MON. / PRM

**LEGEND**

S/B - BUILDING SETBACK	L.E. - LANDSCAPE EASE
MAINT - MAINTENANCE	D.E. - DRAINAGE EASEM
UTL. - UTILITY	U.E. - UTILITY EASEMENT
CONC. - CONCRETE	18" - 5/8" REBAR

**SEMINOLE COUNTY  
APPLICATION & AFFIDAVIT**

**Ownership Disclosure Form**

Please provide the information as requested below in accordance with Ordinance No. 07-23:

1. List all natural persons who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

Name: Valerie + James Lettieri  
Address: 4947 CAINS WOOD TRL  
City/Zip: SANFORD FL 32771  
Phone #: 407 330 0661

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

(Use additional sheets for more space.)

2. For each corporate owner, list the name, address, and title of each officer of the corporation, the name and address of each director of the corporation, and the name and address of each shareholder who owns 2% or more of the stock of the corporation. Shareholders need not be disclosed as to corporations whose shares of stock are traded publicly on any national or regional stock exchange.

Name of Corporation: \_\_\_\_\_  
Officers: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Directors: N/A  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Shareholders: \_\_\_\_\_  
Address: \_\_\_\_\_

Name of Corporation: \_\_\_\_\_  
Officers: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Directors: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_  
Shareholders: \_\_\_\_\_  
Address: \_\_\_\_\_

(Use additional sheets for more space.)

3. In the case of a trust, list the name and address of each trustee and the name and address of the beneficiaries of the trust.

Name of Trust: \_\_\_\_\_  
Trustees: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_

Beneficiaries: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Zip: \_\_\_\_\_

(Use additional sheets for more space.)

**SEMINOLE COUNTY  
APPLICATION AND AFFIDAVIT**

For partnerships, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners.

Name of Partnership: _____	Name of Partnership: _____
Principal: _____	Principal: _____
Address: _____	Address: _____
City/Zip: _____	City/Zip: _____

(Use additional sheets for more space.)

5. In the circumstances of a contract for purchase, list the name of each contract vendee, with their names and addresses, the same as required for corporations, trust, or partnerships. In addition, the date of the contract for purchase shall be specified along with any contingency clause relating to the outcome of the consideration of this petition.

Contract Vendee:	Contract Vendee:
Name: _____	Name: _____
Address: _____	Address: _____
City/Zip: _____	City/Zip: _____

(Use additional sheets for more space.)

6. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.

I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezone, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

2-20-08  
Date

[Signature]  
Owner, Agent, Applicant Signature

STATE OF FLORIDA  
COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me this 20 day of February, 2008 by \_\_\_\_\_

[Signature]  
Signature of Notary Public

Notary Public State of Florida  
Karen Mathews  
My Commission DD556397  
Print, Type or Stamp Name of Notary Public

Personally Known \_\_\_\_\_ OR Produced Identification   
Type of Identification Produced Florida's Drivers License

**For Use by Planning & Development Staff**

Date: \_\_\_\_\_ Application Number: \_\_\_\_\_

**PRESERVE AT ASTOR FARMS HOA**  
5205 S. ORANGE AVENUE  
SUITE 206  
ORLANDO FL 32809  
407-852-5300

**NOTICE OF APPROVAL**

February 08, 2008

VALERIE A LETTIERI  
4947 CAINS WREN TRAIL  
SANFORD FL 32771

RE: 4947 CAINS WREN TRAIL

Dear Owner:

Your Request for Architectural Change as been approved. Specifically, you have approval to proceed with the following:

**Underground pool & spa with screen.**

We reserve the right to make a final inspection of the change to make sure it matches the Request you submitted for Approval. Please follow the plan you submitted or submit an additional Request form if you cannot follow the original plan.

The authority to perform the alteration granted by this approval will automatically expire if the work is not commenced within 6 (six) months. All approvals shall be voided upon the expiration of six (6) months from issuance. A full resubmission must be made for any voided approvals.

This approval does not relieve you of the responsibility of obtaining any and all necessary permits as may be required by Seminole County or any other governmental body that has jurisdiction concerning this modification. You must follow all local building codes and setback requirements when making this change.

This approval should not be taken as any certification as to the construction worthiness or structural integrity of the change you propose. Be aware that you are responsible for contacting the appropriate Utility Companies before digging.

We appreciate your cooperation in submitting this Request for Approval. An attractive Community helps all of us get the full value from our homes when we decide to sell.

Sincerely,  
FOR THE BOARD OF DIRECTORS

***Mickey House***

Michael "Mickey" AMS®, LCAM  
Community Association Manager

# PRESERVE AT ASTOR FARMS HOMEOWNER'S ASSOCIATION

## Architectural Review Committee (ARC) Application

Owner Name Valerie + James Lettieri  
 Address 4947 CAINS Wren Trail  
 Unit/Lot Number 241  
 Home 407-330-0661 Work 516-581-3833 James

In accordance with the Association's governing documents, I/we hereby apply for consent to make the following modification(s) or addition(s):

### STEP 1

**DESCRIPTION OF MODIFICATION OR ADDITION:** The description must include complete information necessary to thoroughly understand anticipated modifications or additions such as the height, width, size, shape, color, etc. Please submit photographs, sketches, brochures, and a copy of your property survey with the location of the improvement(s) indicated on it.  
 Your application cannot be processed without this crucial information!

- Fence
- Swimming Pool
- Patio
- Screen Enclosure
- Landscaping
- Lawn Replacement
- Other \_\_\_\_\_
- Lawn Ornament
- Exterior Color
- Satellite Dish

Description:

Unground concrete pool + spa with screen

Valerie Lettieri  
 Signature

1/19/08  
 Date

### STEP 2

Acknowledgement by all surrounding property owners is needed. Their signatures (below) indicate awareness of intent and do not constitute approval or disapproval. (Use additional sheets if necessary).

X [Signature]  
 Signature:

S P... MD  
 Print Name:

4943 CAINS Wren Trail  
 Address:

240  
 Lot Number

N. Vanzeyst  
 Signature:

Natale Vanzeyst  
 Print Name:

4951 Cains Wren Trail  
 Address:

242  
 Lot Number

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Lot Number: \_\_\_\_\_

# PRESERVE AT ASTOR FARMS HOMEOWNER'S ASSOCIATION

## Architectural Review Committee (ARC) Application

### STEP 3 Acknowledgement of Adjacent Property Owner(s)

This section should be completed if your project will require you to move materials or equipment over the Association's common elements, and/or adjacent property's owner's Lot.

If this section does not apply to your project, please initial here.

Owner's Initials Val

If your project will require you to move materials or equipment over the Association's common elements you must indicate on the copy of your Property Description any area(s) if common elements that will be affected. A signature must be obtained from the Association's Managing Agent.

Owner's Initials Val

I/we hereby acknowledge that in order to complete the above-described alteration, the above-described owner must cross my/our lot(s) with materials and/or equipment. The above-described owner shall bear full responsibility for repair of any damage caused by said materials and/or equipment. In no instance shall the Association or the Declarant be held responsible for said damage.

Signature: [Signature] *SPURIA MD* Print Name: J. PULIA MD

Address: 4943 CAINS WREN TRAIL Lot Number 240

Signature: [Signature] Print Name: Natalie Vanzeyot

Address: 4951 CAINS WREN TRAIL Lot Number 242

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number \_\_\_\_\_

Managing Agent's Signature (if Applicable):

\_\_\_\_\_

Print Name/Title

# PRESERVE AT ASTOR FARMS HOMEOWNER'S ASSOCIATION

## Architectural Review Committee (ARC) Application

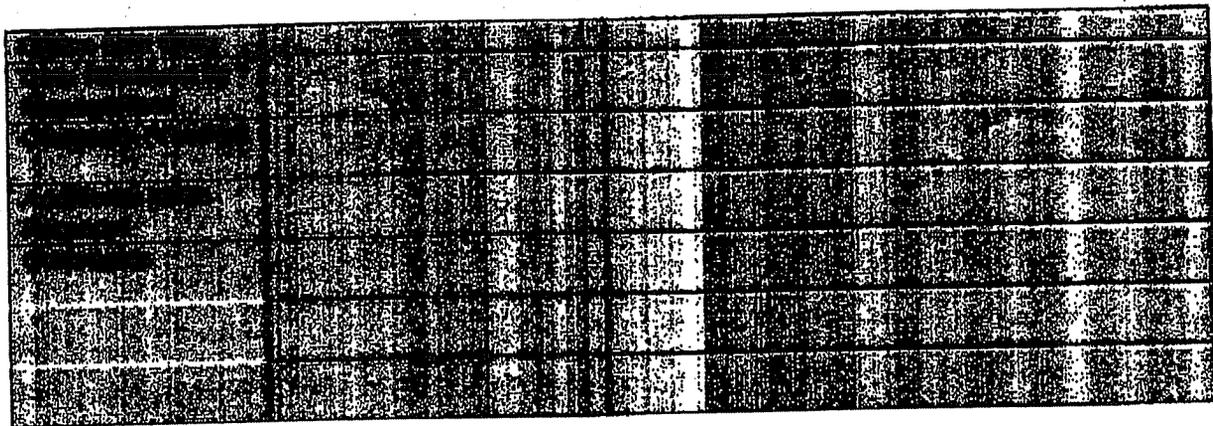
### STEP 4

Owner's acknowledgement: I/we understand that:

1. Material herein contained shall represent alterations that comply with all applicable zoning and building codes. Further, nothing herein contained shall be construed as a waiver or modification of such ordinances. I/we are responsible for obtaining necessary building permits prior to commencement of construction.
2. No work shall commence until written approval of the Board of Directors has been received by me/us. Any alteration completed before approval of this application is not permitted and if alterations are made, I/we understand that we may be required to return the property to its former condition at my/our expense; and that I/we may be required to pay all legal expenses incurred.
3. All approved alterations must be completed within 6 months of final approval. All approvals shall be voided upon the expirations of six months from issuance. A full resubmission must be made for any voided approvals.
4. Approval is contingent upon all work being completed in a diligent and workmanlike manner. Members of the Board of Directors and their agent(s) reserve the right to make routine inspections.
5. I/we take full responsibility for any damages to the Association's common elements, the property of the Declarant, or any other privately or publicly owned property as a result of my/our actions or the actions of our contractors or agents. In particular and with limitation, I/we acknowledge that I/we will be responsible for any curb, sidewalk, driveway, apron, landscaping and/or drainage damage that may be caused by the installation of the requested improvement.
6. This request is subject to restrictions by the Association's governing documents and a review process as established by the Board of Directors. Any variation from the original application must be resubmitted. The Board will return a copy of this request to me/us after review.
7. The Board or Committee shall take up to 30 days to review and reply to the application. House of Management Enterprises, Inc is solely responsible for processing the applications and will return by mail the application confirming the approval or disapproval including any and all stipulations or denial reasons.

*Valerie Litten*  
 Owner's Signature

1/19/08  
 Date



**PRESERVE AT ASTOR FARMS HOMEOWNER'S ASSOCIATION**

**Architectural Review Committee (ARC) Application**

**STEP 5: To Be Completed by the Board of Directors/Architectural Review Committee**

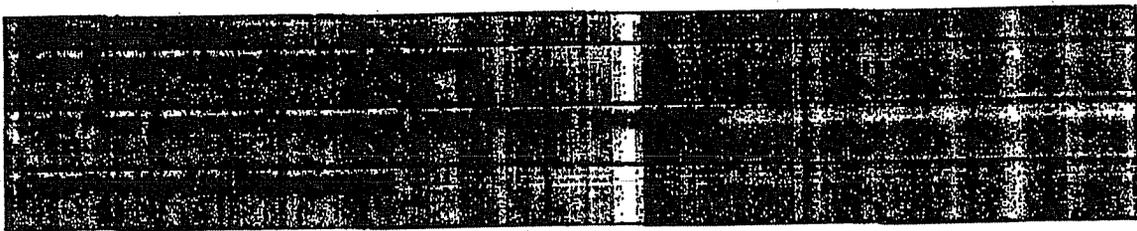
Date Received by Board of Directors 2-6-08

- Final approval as requested
- Final approval subject to the following conditions/modifications. (See Comments)
- Disapproved for the following reasons. (See Comments)

Comments: Mr. LeHien reported that he had gotten approval from the HOA board to build on the rear of his property within the property easement. Please ensure all county permits and approvals are obtained prior to construction

[Signature]  
 Signature - Board of Directors Chairperson

2-6-08  
 Date



**PLEASE SUBMIT COMPLETED FORMS AND DOCUMENTATION TO:**

House of Management Enterprises  
 5205 South Orange Ave, Ste 206  
 Orlando FL 32809

Office #407-852-5300  
 Fax # 407-852-5301

<p><b>PARCEL DETAIL</b></p> <p>DAVID JOHNSON, CFA, ASA</p> <p><b>PROPERTY APPRAISER</b></p> <p>SEMINOLE COUNTY, FL</p> <p>1101 E. FIRST ST SANFORD, FL 32771-1468 407-668-7506</p>																																																																			
<p style="text-align: center;"><b>GENERAL</b></p> <p>Parcel Id: 18-19-30-5RS-0000-2410</p> <p>Owner: LETTIERI VALERIE A</p> <p>Mailing Address: 4947 CAINS WREN TRL</p> <p>City,State,ZipCode: SANFORD FL 32771</p> <p>Property Address: 4947 CAINS WREN TRL SANFORD 32771</p> <p>Subdivision Name: PRESERVE AT ASTOR FARMS PH 3</p> <p>Tax District: 01-COUNTY-TX DIST 1</p> <p>Exemptions: 00-HOMESTEAD (2008)</p> <p>Dor: 01-SINGLE FAMILY</p>	<p style="text-align: center;"><b>2008 WORKING VALUE SUMMARY</b></p> <p>Amendment 1 impact not reflected.</p> <p>Value Method: Market</p> <p>Number of Buildings: 1</p> <p>Depreciated Bldg Value: \$327,849</p> <p>Depreciated EXFT Value: \$0</p> <p>Land Value (Market): \$77,000</p> <p>Land Value Ag: \$0</p> <p>Just/Market Value: \$404,849</p> <p>Assessed Value (SOH): \$404,849</p> <p>Exempt Value: \$25,000</p> <p>Taxable Value: \$379,849</p> <p style="text-align: center;"><b>Tax Estimator</b></p> <p style="text-align: center;"><b>Portability Calculator</b></p>																																																																		
<p style="text-align: center;"><b>SALES</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Deed</th> <th>Date</th> <th>Book</th> <th>Page</th> <th>Amount</th> <th>Vac/Imp</th> <th>Qualified</th> </tr> </thead> <tbody> <tr> <td>SPECIAL WARRANTY DEED</td> <td>01/2007</td> <td>06656</td> <td>1514</td> <td>\$576,400</td> <td>Improved</td> <td>Yes</td> </tr> <tr> <td>SPECIAL WARRANTY DEED</td> <td>06/2005</td> <td>05748</td> <td>0386</td> <td>\$11,624,300</td> <td>Vacant</td> <td>No</td> </tr> </tbody> </table> <p style="text-align: center;">Find Comparable Sales within this Subdivision</p>	Deed	Date	Book	Page	Amount	Vac/Imp	Qualified	SPECIAL WARRANTY DEED	01/2007	06656	1514	\$576,400	Improved	Yes	SPECIAL WARRANTY DEED	06/2005	05748	0386	\$11,624,300	Vacant	No	<p style="text-align: center;"><b>2007 VALUE SUMMARY</b></p> <p>2007 Tax Bill Amount: \$6,245</p> <p>2007 Taxable Value: \$422,855</p> <p>DOES NOT INCLUDE NON-AD VALOREM ASSESSMENTS</p>																																													
Deed	Date	Book	Page	Amount	Vac/Imp	Qualified																																																													
SPECIAL WARRANTY DEED	01/2007	06656	1514	\$576,400	Improved	Yes																																																													
SPECIAL WARRANTY DEED	06/2005	05748	0386	\$11,624,300	Vacant	No																																																													
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Microsoft Access - [Commitment Card]

File Edit View Insert Format Records Tools Window Help

Active Permits Bond Information General Information Commitment Card

Type a question for help

Impact Fee Typ - Arial 10

Zoning Project Name: \_\_\_\_\_

UPC Project Name: PRESERVE AT ASTOR FARMS PHASE 3 Plat Name: \_\_\_\_\_

Roll Number: 118-96 File # PZ: \_\_\_\_\_ BA Date: \_\_\_\_\_ BCC Date: \_\_\_\_\_

Parcel ID #: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Platbook #: \_\_\_\_\_ Page: \_\_\_\_\_ Location: 2781 West SR 434 District: 3

Owner/Developer: Patrick Dougherty Address: 2781 West SR 434

City: Longwood State: FL Zip Code: 32779 Phone: 682-5988

Development Order #: \_\_\_\_\_ Development Order Link: \_\_\_\_\_ ICA Link: \_\_\_\_\_

DRC Project Manager: \_\_\_\_\_ Zoning PM: \_\_\_\_\_ Inspector: Laracuente, Jackie

Developer Commitments | Zoning Requirements | Impact Fees

Traffic Zone: \_\_\_\_\_ Land Use: \_\_\_\_\_ Fee Subtotal: \$2,315.00

Impact Fee Type	Impact Fee Amount	Comments
Collector Road	\$705.00	
Library	\$54.00	
Fire	\$172.00	
School	\$1,384.00	
	\$0.00	

Record: 14 of 1007 of 1471

Form View

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**Setbacks:**

- FY 20 ft.
- SS 15 ft.
- SY 5 ft.
- RY 20 ft.

Village A on PUD Master Plan

## SEMINOLE COUNTY APPROVAL DEVELOPMENT ORDER

On March 24, 2008, Seminole County issued this Development Order relating to and touching and concerning the following described property:

LOT 241 PRESERVE AT ASTOR FARMS PH 3 PB 66 PGS 40-43

(The aforescribed legal description has been provided to Seminole County by the owner of the aforescribed property.)

### FINDINGS OF FACT

**Property Owner:** Valerie & James Lettieri  
4947 Cains Wren Trail  
Sanford, Fl. 32771

**Project Name:** Cains Wren Trail (4947)

**Requested Development Approval:**

Request for a (1) rear yard setback variance from 10 feet to 2 feet for a proposed pool and (2) rear yard setback variance from 5 feet to 0 feet for a pool screen enclosure in PUD (Planned Unit Development District)

The Development Approval sought is consistent with the Seminole County Comprehensive Plan and will be developed consistent with and in compliance to applicable land development regulations and all other applicable regulations and ordinances.

The owner of the property has expressly agreed to be bound by and subject to the development conditions and commitments stated below and has covenanted and agreed to have such conditions and commitments run with, follow and perpetually burden the aforescribed property.

Prepared by: Kathy Fall, Principal Planner  
1101 East First Street  
Sanford, Florida 32771

**Order**

**NOW, THEREFORE, IT IS ORDERED AND AGREED THAT:**

- (1) The aforementioned application for development approval is **GRANTED**.
- (2) All development shall fully comply with all of the codes and ordinances in effect in Seminole County at the time of issuance of permits including all impact fee ordinances.
- (3) The conditions upon this development approval and the commitments made as to this development approval, all of which have been accepted by and agreed to by the owner of the property are as follows:
  - a. The variance from 10 feet to 2 feet will apply to the pool and variance from 5 feet to 0 feet will apply to the associated screen enclosure as depicted in the attached site plan.
- (4) This Development Order touches and concerns the aforescribed property and the conditions, commitments and provisions of this Development Order shall perpetually burden, run with and follow the said property and be a servitude upon and binding upon said property unless released in whole or part by action of Seminole County by virtue of a document of equal dignity herewith. The owner of the said property has expressly covenanted and agreed to this provision and all other terms and provisions of this Development Order.
- (5) The terms and provisions of this Order are not severable and in the event any portion of this Order shall be found to be invalid or illegal then the entire order shall be null and void.

Done and Ordered on the date first written above.

By: \_\_\_\_\_  
Alison C. Stettner  
Planning Manager

STATE OF FLORIDA )  
COUNTY OF SEMINOLE )

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who executed the foregoing instrument.

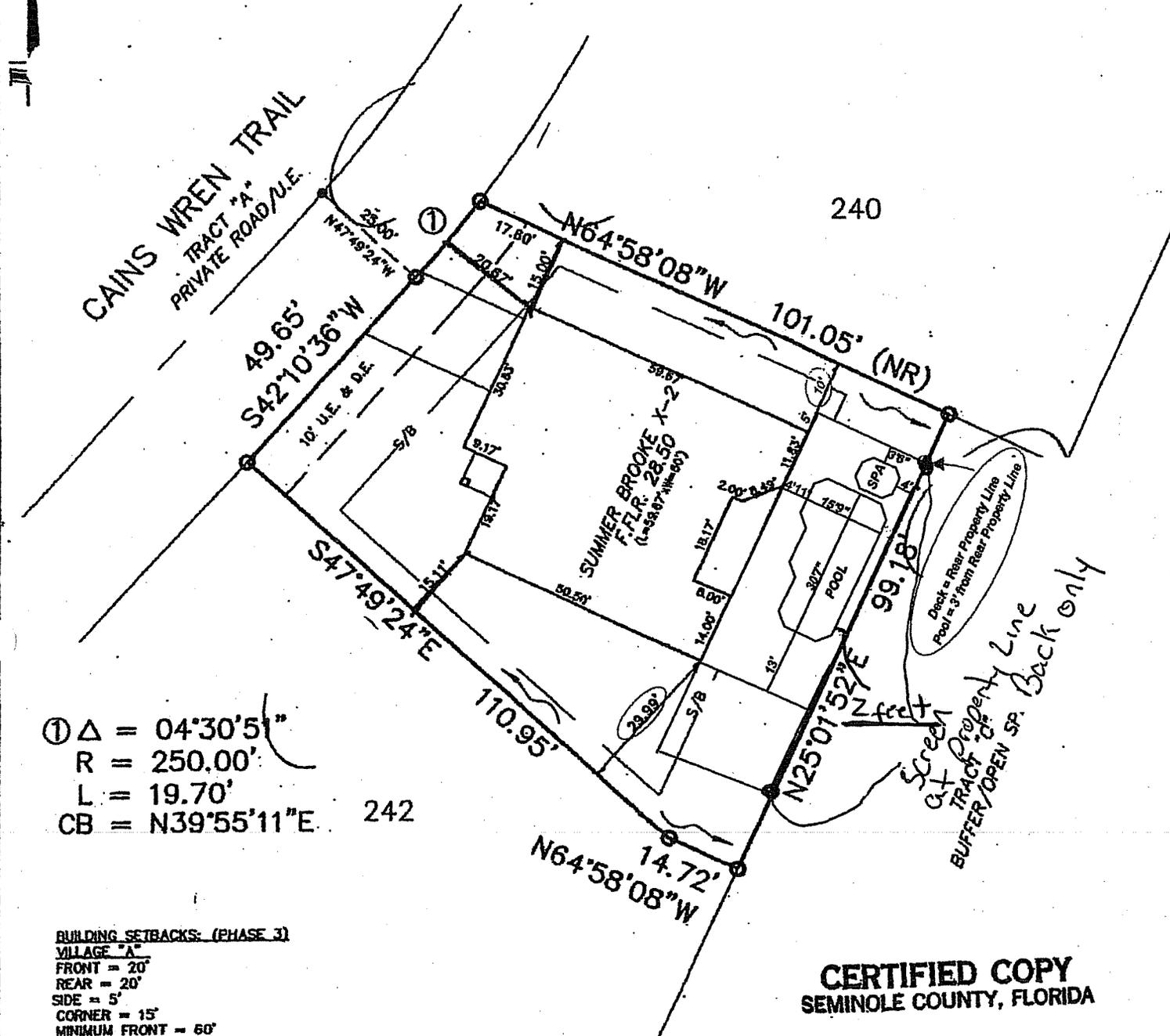
WITNESS my hand and official seal in the County and State last aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 2008.

\_\_\_\_\_  
Notary Public, in and for the County and State  
Aforementioned

My Commission Expires:

# PRESERVE AT ASTOR FARMS, PHASE 3

ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 66 ON PAGES 40, 41, 42 & 43 OF THE PUBLIC RECORDS OF SEMINOLE COUNTY, FLORIDA,



① Δ = 04°30'51"  
 R = 250.00'  
 L = 19.70'  
 CB = N39°55'11\"

**BUILDING SETBACKS: (PHASE 3)**  
 VILLAGE "A"  
 FRONT = 20'  
 REAR = 20'  
 SIDE = 5'  
 CORNER = 15'  
 MINIMUM FRONT = 60'  
 70' FOR CORNER LOTS  
**POOL SETBACKS:**  
 POOL-WATER = 10' SIDE/REAR  
 SCREEN = 5' SIDE/REAR

**MODEL OPTIONS:**  
 SITTING ROOM  
 SUITE 5 (INT)  
 2-CAR FRONT ENTRY GARAGE/STUDY

**CERTIFIED COPY**  
 SEMINOLE COUNTY, FLORIDA

**NOTES:**  
 ROOF OVERHANGS & FOOTERS HAVE NOT BEEN LOCATED  
 NO UNDERGROUND IMPROVEMENTS HAVE BEEN LOCATED.  
 BUILDING TIES ARE NOT TO BE USED TO CONSTRUCT DEED OR PLATTED LINES  
 THE LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, RIGHTS OF WAY, RESTRICTIONS, USES, INTERESTS OR MATTERS OF RECORD BY THIS FIRM

LOT DRAINAGE TYPE "A-MOD"

TOTAL LOT AREA	9,564	SQ.FT. (+/-)
FLATWORK On Lot/OFF Lot=TOTAL		SQ.FT. (+/-)
DRIVE	395/208=603	SQ.FT. (+/-)
WALKS	51/213=264	SQ.FT. (+/-)
FLATWORK		SQ.FT. (+/-)
FOUNDATION/PAD	2,644	SQ.FT. (+/-)
REAR PATIO	163	SQ.FT. (+/-)
FRONT PORCH DECK	45	SQ.FT. (+/-)

NOTE: INSTALLED LANDSCAPING SHALL COMPLY WITH APPLICABLE CONDITIONS OF THE ASTOR FARMS PUD.

- - INDICATES 18" - 5/8" REBAR/CAP (LB 6) UNLESS NOTED OTHERWISE
- - INDICATES PERMANENT CONTROL POINT
- - INDICATES CONC. MON. / PRM

**LEGEND**

S/B - BUILDING SETBACK	L.E. - LANDSCAPE EASEM
M/INT - MAINTENANCE	D.E. - DRAINAGE EASEM
UTL - UTILITY	U.E. - UTILITY EASEMENT
CONC. - CONCRETE	IP - IRON PIPE

## SEMINOLE COUNTY DENIAL DEVELOPMENT ORDER

On March 24, 2008, Seminole County issued this Development Order relating to and touching and concerning the following described property:

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The Development Approval was sought to construct a pool and its associated screen enclosure into the rear yard setback. The applicant still retains reasonable use of the property without the granting of the requested variance

The requested development approval is hereby denied.

Prepared by: Kathy Fall, Principal Planner  
1101 East First Street  
Sanford, Florida 32771

Done and Ordered on the date first written above.

By: \_\_\_\_\_  
Alison C. Stettner  
Planning Manager

STATE OF FLORIDA )  
COUNTY OF SEMINOLE )

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who executed the foregoing instrument.

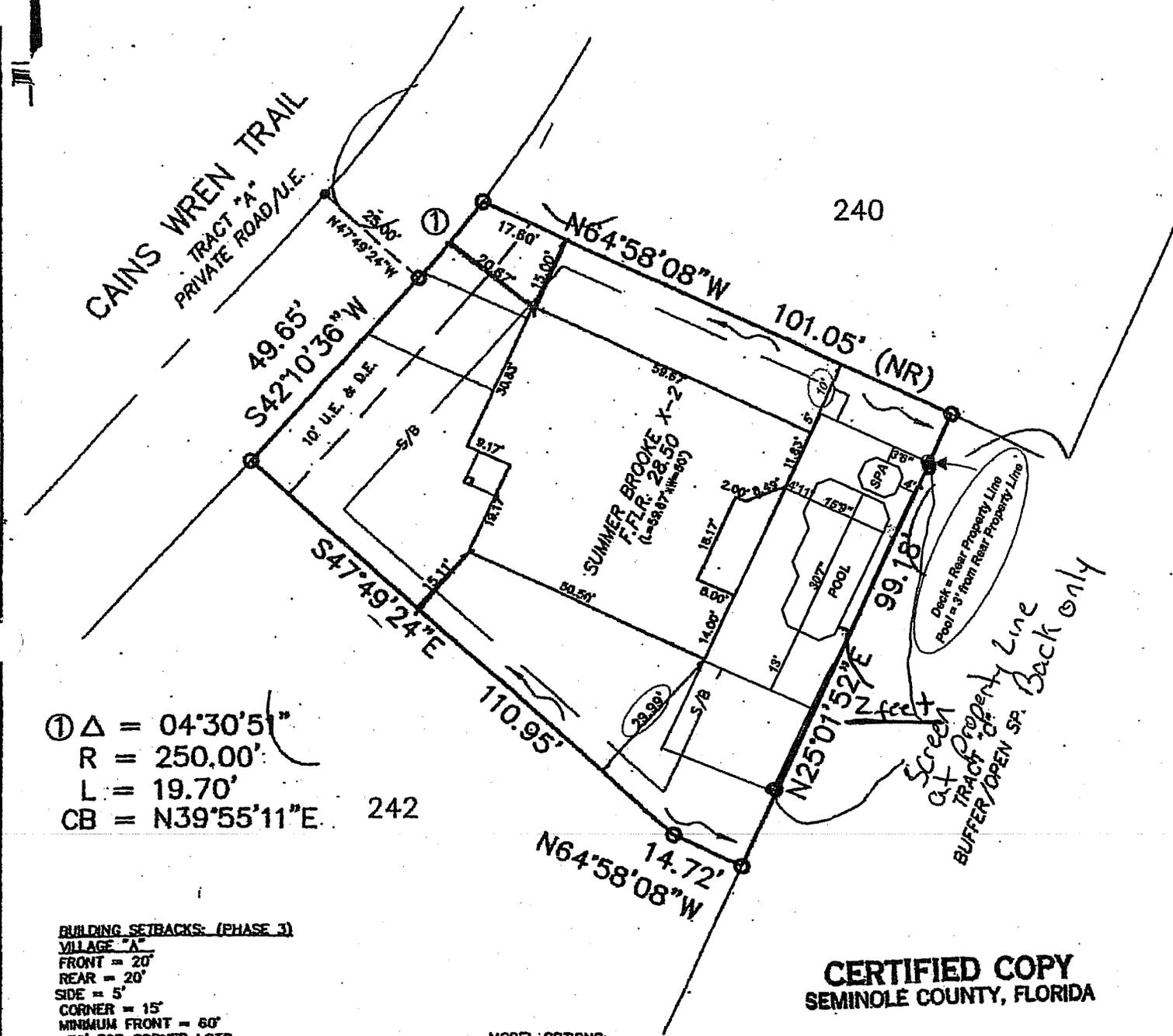
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**CERTIFIED COPY**  
 SEMINOLE COUNTY, FLORIDA

LOT DRAINAGE TYPE "A-MOD"

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GRD	8,289,410=5,578		SQ.FT. (+/-)

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CONC.	= CONCRETE	10	= 10' DIA