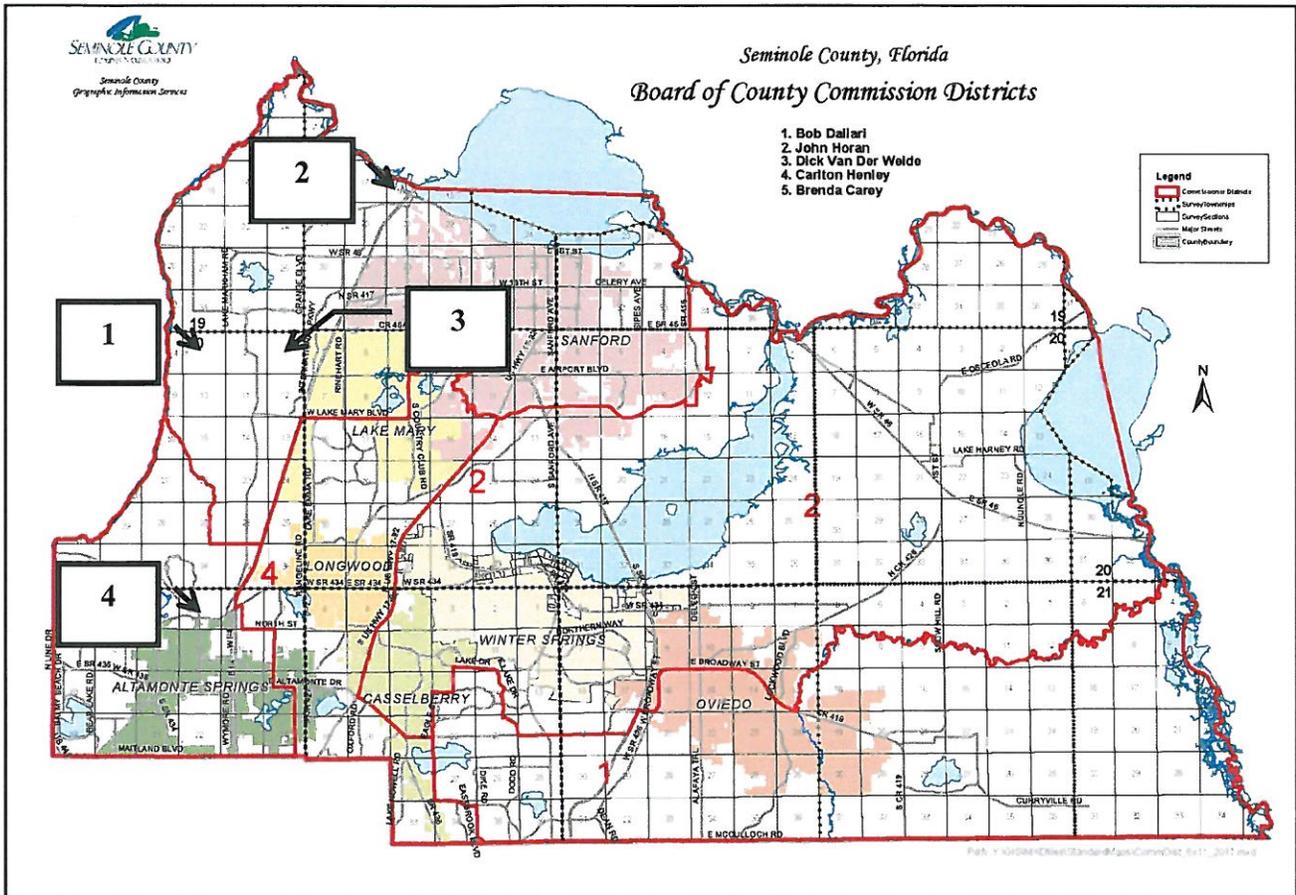


# SEMINOLE COUNTY GOVERNMENT

1101 EAST FIRST STREET  
SANFORD, FLORIDA 32771  
(407) 665-7331

[www.seminolecountyfl.gov](http://www.seminolecountyfl.gov)

**To:** Applicants, Staff and Interested Parties  
**From:** Growth Management Department, Planning & Development Division  
**Subject:** **DEVELOPMENT REVIEW COMMITTEE MEETING FOR WEDNESDAY 06/06/2012**



County staff and applicants will review the following items on the above date at the time schedule below. The meeting will be held in **Room #3024** on the third floor of the County Services Building.

<b>ITEM NO: 1</b>	<b>DR - SITE PLAN</b>	<b>PROJ NO 12-0600028</b>	<b>TIME 9:00AM</b>
<b>PROJECT NAME</b>	<b>MIKE BENDER GOLF ACADEMY SITE PLAN</b>	<b>PROJECT MANAGER</b>	<b>BRIAN WALKER (407) 665-7337</b>
<b>APPLICANT</b>	TIM PERRY	CIVIL ENGINEERING GROUP	(407) 947-7549
<b>PROJECT DESC</b>	SITE PLAN APPROVAL FOR A 4,496SF GOLF ACADEMY FACILITY ON 4.57 ACRES ZONED PUD		
<b>LOCATION</b>	NW SIDE OF SHADOW MOSS CIR AT TIMBERBROOK DR		
<b>PARCEL ID</b>	03-20-29-5PG-FB00-0000		
<b>BCC DISTRICT</b>	5-CAREY		

ITEM NO: 2	DR - SITE PLAN	PROJ NO 12-06000027	TIME 9:20AM
PROJECT NAME	DONNIE MYERS RV PHASE 2 SITE PLAN	PROJECT MANAGER	BRIAN WALKER (407) 665-7337
APPLICANT	MCKEE CONSTRUCTION CO.	BOBBY VON HERBULIS	(407) 323-1150
CONSULTANT	TANNATH DESIGN, INC.	BRYAN POTTS, P.E.	(407) 982-9878
PROJECT DESC	SITE PLAN APPROVAL FOR A 43,551SF WAREHOUSE/OFFICE COMPLEX ON 11.18 ACRES ZONED PCD		
LOCATION	SW CORNER OF MONROE RD & ORANGE BLVD		
PARCEL ID	16-19-30-5AC-0000-0120		
BCC DISTRICT	5-CAREY		

ITEM NO: 3	PZ - PUD/PCD	PROJ NO 12-20500004	TIME 9:40AM
PROJECT NAME	BANANA LAKE RD - LSLUA AND REZONE AKA COVENTRY AT HEATHROW	PROJECT MANAGER	CYNTHIA SWEET (407) 665-7443
APPLICANT	TAYLOR MORRISON OF FLORIDA	151 SOUTHHALL LANE STE 200	(407) 629-0077
CONSULTANT	MADDEN, MOORHEAD & GLUNT, INC.	ATTN: CHAD MOORHEAD	(407) 629-8330
PROJECT DESC	LSFLUA FROM SE TO PD & REZONE FROM A-1 TO PUD LOCATED ON 32.37 ACRES		
LOCATION	W SIDE OF BANANA LAKE RD SOUTH OF 46A		
PARCEL ID	01-20-29-501-0000-001A, 001B, 001C, 0020		
BCC DISTRICT	5-CAREY		

ITEM NO: 4	DR - SITE PLAN	PROJ NO 12-06000026	TIME 10:00AM
PROJECT NAME	PUBLIX - LONGWOOD SITE PLAN	PROJECT MANAGER	CYNTHIA SWEET (407) 665-7443
APPLICANT	WINDCREST DEVELOPMENT GROUP	TOM MURRAY, P.E.	(407) 219-3540
CONSULTANT	KIMLEY-HORN & ASSOC.	JAY R. JACKSON	(407) 898-1511
PROJECT DESC	SITE PLAN APPROVAL FOR A 49,533 RETAIL GROCERY STORE ZONED C-1		
LOCATION	NW CORNER OF SR 434 & WEKIVA SPRINGS RD		
PARCEL ID	03-21-29-300-009D-0000		
BCC DISTRICT	3- VAN DER WEIDE		

Notice to Applicant: A copy of the staff comments and recommendations will be faxed to the Applicant and the Consultant **by 12:00 noon on the Tuesday before the scheduled meeting**. If you have any questions, please contact Development Review at (407) 665-7331. **If you intend to have an attorney present, please notify your project manager before meeting date.**

After review of the comments, the applicant may not need to meet with the staff in a group. If so, please contact Development Review so the agenda may be adjusted accordingly.

Thank you.

8mw



SEMINOLE COUNTY GROWTH MANAGEMENT  
PLANNING & DEVELOPMENT DIVISION  
1101 EAST FIRST STREET ROOM 2028  
SANFORD, FL 32771  
(407) 665-7441 PHONE (407) 665-7385 FAX  
www.seminolecountyfl.gov/gm

SMALL SITE PLAN LESS THAN 2,500 SF: YES  NO

DREDGE & FILL: YES  NO

12-06 000028

**APPLICANT INFORMATION**

APPLICANT: TIM PERRY (AGENT)	CONTACT: TIM PERRY
ADDRESS: 235 S. MATLAND AVE SUITE 216	
CITY: MATLAND FL	STATE: FL ZIP: 32751
PHONE: 407-947-7549	FAX: 407-374-2754 EMAIL: TKPSD2005@AOL.COM

**CONSULTANT INFORMATION**

ENGINEER: CIVIL ENGINEERING GROUP	CONTACT: TIM PERRY
ADDRESS: 2480 E. MICHIGAN ST	
CITY: ORLANDO	STATE: FL ZIP: 32806
PHONE: 407-947-7549	FAX: 407-374-2754 EMAIL: TKPSD2005@AOL.COM

**OWNER INFORMATION**

Is Owner's Authorization Attached? YES  NO

OWNER: COOLICAN GOLF MANAGEMENT	CONTACT: TIM PERRY
ADDRESS: 600 SHADOW MOSS CR	
CITY: LAKE MARY	STATE: FL ZIP: 32746
PHONE: 407-947-7549	FAX: 407-374-2754 EMAIL: TKPSD2005@AOL.COM

**SITE INFORMATION**

PARCEL ID #: 03-20-29-5Pg - FB00-0000
PROJECT NAME: MIKE BENDER GOLF ACADEMY
DESCRIPTION OF PROJECT: 4500 SF. DETACHED GOLF FACILITY
INTENDED USE OF PROPERTY: GOLF TRAINING, EXERCISE, OFFICE
LOCATION: NW Side of shadow moss cr at timberbrook Dr.
ZONING: PD/PUD FUTURE LAND USE: PD/PUD TOTAL ACREAGE: 4.57 BCC DISTRICT: 5-Carey

**UTILITIES**

WATER PROVIDER: SEMINOLE COUNTY	SEWER PROVIDER: Sem Co
IS PROPERTY SERVED BY WELL? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	EXISTING IRRIGATION WELL
IS PROPERTY SERVED BY SEPTIC? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	FEE ATTACHED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

**ARBOR**

ARE ANY TREES BEING REMOVED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARBOR PERMIT APPLICATION ATTACHED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	FEE ATTACHED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

**ADDITIONAL SITE INFORMATION**

IMPERVIOUS SURFACE AREA :				
BUILDING AREA:		EXISTING:		NEW: 4,496
PAVEMENT AREA:		EXISTING:		NEW: 1,299
IF DREDGE & FILL, HOW MANY CUBIC YARDS OF FILL IS PROPOSED? <u>0</u>				

**FEES**

SMALL SITE PLAN OR FILL:	\$200.00
DREDGE & FILL:	\$650.00
REGULAR SITE PLAN : <i>Sq. ft. of all NEW Impervious Surfaces (rounded to 2 decimal points)</i>	
To calculate regular site plan application fee, please use the formula below or the fee calculator <a href="http://www.seminolecountyfl.gov/gm/pd_calc.asp">http://www.seminolecountyfl.gov/gm/pd_calc.asp</a>	Fee Amount: \$ 1,115.90
$\Sigma \quad \$1000+ \left[ \frac{5,795 \text{ New Impervious}}{1000} \right] \times \$20 = \text{Fee Amount}$	

**CONCURRENCY REVIEW MANAGEMENT SYSTEM: (Please check one.)**

<http://www.seminolecountyfl.gov/gm/devrev/concurrency.asp>

I elect to defer the Concurrency Review determination for the above listed property until a point as late as Final Engineering Submittal. (Minor Plat and Final Engineering require Concurrency Test Review.) I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future.

**WE MAY HAVE THIS**  
I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued and unexpired Certificate of Vesting or prior Concurrency determination as identified below: (Please attach a copy of the Certificate of Vesting or Prior Test/Concurrency Notice.)  
Vesting Certificate/Test Notice Number: \_\_\_\_\_ Date issued: \_\_\_\_\_

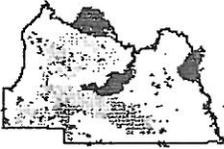
Concurrency Application and appropriate fee is attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management Monitoring System.

I understand that the application for site plan review must include all required submittals as specified in Chapter 40, Part 4, of the Seminole County Land Development Code. Submission of incomplete plans may create delays in review and plan approval. The review fee provides for two plan reviews. Additional reviews will require an additional fee.

Applicant's Signature: [Signature] Date: 5-8-12

<b>OFFICIAL USE</b>	
PROJECT #:	PLANNER ASSIGNED:

RECEIVED MAY 09 2012



SEMINOLE COUNTY MULTI-JURISDICTIONAL

LIMITED POWER OF ATTORNEY

Altamonte Springs, Casselberry, Lake Mary, Longwood, Sanford, Seminole County, Winter Springs

Date: 3/5/12

I hereby name and appoint: Tim Perry an agent of: Coolican Golf Management LLC (Name of Company)

to be my lawful attorney-in-fact to act for me to apply for, receipt for, sign for and do all things necessary to this appointment for (check only one option):

[X] All permits and applications submitted by this contractor.

[ ] The specific permit and application for work located at:

600 Shadowmass Circle Lake Mary, FL (Street Address)

03-20-29-5 PG-FA00-0000 03-20-29-5 PG (Parcel Identification) FB00-0000

Expiration Date for This Limited Power of Attorney: 3-10-13

License Holder Name:

State License Number:

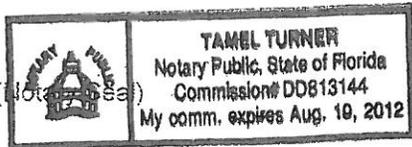
Signature of License Holder:

STATE OF FLORIDA COUNTY OF Seminole

The foregoing instrument was acknowledged before me this 5th day of March 20 12, by Timothy J. Coolican who is [ ] personally known to me or [ ] who has produced C 425-810-64-2670 as identification and who did (did not) take an oath.

Signature of Notary

Tamel Turner Print or type Notary name



Notary Public - State of Florida Commission No. DD813144 My Commission Expires: Aug. 10, 2012



Parcel: 03-20-29-5PG-FB00-0000

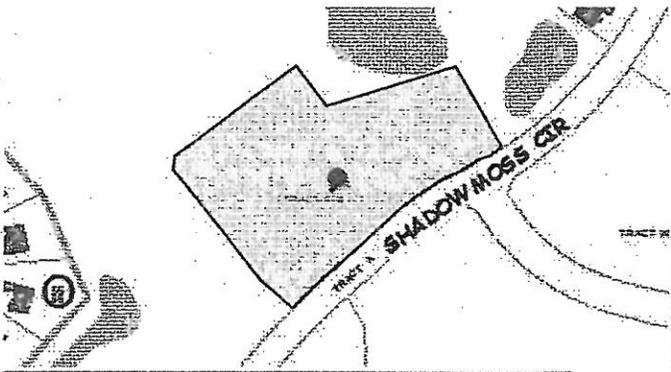
Owner: COOLICAN GOLF MGMT LLC ATTN PATRICE COOLICAN

Property Address: 600 SHADOWMOSS CIR LAKE MARY, FL 32746

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Parcel: 03-20-29-5PG-FB00-0000

Property Address: 600 SHADOWMOSS CIR  
 Owner: COOLICAN GOLF MGMT LLC ATTN PATRICE COOLICAN  
 Mailing: 600 SHADOWMOSS CIR LAKE MARY, FL 32746  
 Facility Name: MAGNOLIA PLANTATION GOLF & CC  
 Tax District: 01 COUNTY-TX DIST 1  
 Exemptions:  
 DOR Use Code: 38-GOLF COURSE



Map Aerial Both Footprint + - Extents Center  
 Larger Map Dual Map View - External

Value Summary		
Valuation Method	2012 Working Values	2011 Certified Values
	Cost/Market	Cost/Market
Number of Buildings	3	3
Depreciated Bldg Value	\$528,371	\$528,371
Depreciated EXFT Value	\$72,505	\$72,505
Land Value (Market)	\$528,892	\$528,892
Land Value Ag		
Just/Market Value **	\$1,129,768	\$1,129,768
Portability Adj		
Save Our Homes Adj	\$0	\$0
Amendment 1 Adj	\$0	\$0
Assessed Value	\$1,129,768	\$1,129,768

Tax Amount without SOH: \$17,555  
 2011 Tax Bill Amount \$17,555  
 Tax Estimator  
 Save Our Homes Savings: \$0

\* Does NOT INCLUDE Non Ad Valorem Assessments

**Legal Description**  
 TRACT F-B & TRACTS G & H & J & K & F-A & F-C MAGNOLIA PLANTATION PB 55 PGS 73 THRU 93

**Tax Details**

Taxing Authority	Assessment Value	Exempt Values	Taxable Value
County General Fund	\$1,129,768	\$0	\$1,129,768
Schools	\$1,129,768	\$0	\$1,129,768
Fire	\$1,129,768	\$0	\$1,129,768
Road District	\$1,129,768	\$0	\$1,129,768
SJWM(Saint Johns Water Management)	\$1,129,768	\$0	\$1,129,768
County Bonds	\$1,129,768	\$0	\$1,129,768

**Sales**

Deed	Date	Book	Page	Amount	Vac/Imp	Qualified
CERTIFICATE OF TITLE	05/2005	05720	0525	\$100	Improved	No
SPECIAL WARRANTY DEED	09/1999	03732	0069	\$500,000	Vacant	No

[Find Comparable Sales within this Subdivision](#)

**Land**

Method	Frontage	Depth	Units	Unit Price	Land Value
ACREAGE			69.420	100.00	\$1,736
ACREAGE			120.000	1,000.00	\$30,000
LOT			1.000	988,624.00	\$247,156
LOT			1.000	999,999.00	\$250,000

**Building Information**

#	Description	Year Built	Stories	Total SF	Ext Wall	Adj Value	Repl Value	Appendages	
1	WOOD BEAM/COLUMN	2000	1	5,618.00	WOOD SIDING WITH WOOD OR METAL STUDS	\$115,581	\$115,581	Description	Area
2	STEEL/PRE ENGINEERED.	2001	1	4,850.00	METAL PREFINISHED - INSULATED	\$93,827	\$93,827	Description	Area
								CARPORT FINISHED	950
3	WOOD BEAM/COLUMN	2001	1	5,370.00	WOOD SIDING WITH WOOD OR METAL STUDS	\$318,963	\$318,963	Description	Area
								OPEN PORCH FINISHED	1553
								OPEN PORCH FINISHED	959

Permits

Permit #	Type	Agency	Amount	CO Date	Permit Date
04325	Miscellaneous	County	\$2,200		06/01/2010
14168	Personal Property	County	\$0		12/19/2003
01410	Addition - Commercial	County	\$2,400		02/01/2001
00758	Addition - Commercial	County	\$900		01/01/2001
00284	Addition - Commercial	County	\$1,800		01/01/2001
11367	Personal Property	County	\$460		12/01/2000
10584	Personal Property	County	\$4,000		11/01/2000
08366	Addition - Commercial	County	\$0		09/11/2000
08367	Addition - Commercial	County	\$0		09/11/2000
04036	Addition - Commercial	County	\$0		05/02/2000
04038	Addition - Commercial	County	\$0		05/02/2000
03068	Addition - Commercial	County	\$0		04/01/2000
03065	Addition - Commercial	County	\$0		04/01/2000
03069	Addition - Commercial	County	\$0		04/01/2000
02462	Addition - Commercial	County	\$175,584	11/28/2000	03/24/2000
02460	Addition - Commercial	County	\$24,000	12/11/2000	03/24/2000
02463	Addition - Commercial	County	\$179,800	11/17/2001	03/24/2000
02446	Major Project - Commercial	County	\$756,000	03/06/2001	03/24/2000

Extra Features

Description	Year Blt.	Units	Value	Cost New
OVERRIDE	2000	79,020	\$41,320	\$41,320
OVERRIDE	2000	21,744	\$27,397	\$27,397
OVERRIDE	2000	252	\$635	\$635
OVERRIDE	2000	705	\$1,333	\$1,333
OVERRIDE	2000	600	\$1,820	\$1,820

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12-06000028

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SEMINOLE COUNTY GROWTH MANAGEMENT  
PLANNING & DEVELOPMENT DIVISION  
1101 EAST FIRST STREET ROOM 2028  
SANFORD, FL 32771  
(407) 665-7441 PHONE (407) 665-7385 FAX

CHECKLIST FOR SITE PLAN REVIEW

Applicant's Initial APPLICATION SUBMITTAL CHECKLIST

Staff's Initial

N/A Dated copy of School Impact Analysis submitted to the School Board  
(Residential Projects Only)

✓ Transmittal Letter

✓ Completed Application

✓ Fee-Check# \_\_\_\_\_ Amount: 1,115.90

✓ Concurrency Application

\_\_\_\_\_ Fee-Check# \_\_\_\_\_ Amount: 250.00

N/A Arbor Application

N/A Fee-Check# \_\_\_\_\_ Amount: \_\_\_\_\_

✓ Health Department Fees

\_\_\_\_\_ Fee-Check# \_\_\_\_\_ Amount: 150.00

N/A Complete sets of Site Plan (12 folded copies)  
Landscape plans NO attached  
Lighting plans YES attached, (if applicable)  
Irrigation plans NO attached

✓ Stormwater Calculations (2 copies)

N/A Soils Report (2 copies) (if applicable)

N/A Lift Station Calculations (2 copies) (if applicable)

\_\_\_\_\_ Traffic and Engineering Report (2 copies)

Staff's Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

FOR OFFICIAL USE

PROJECT#: 12-80000035  
(Pre-app)

PLANNER: Bmw

6.2112  
DCC



**SEMINOLE COUNTY GROWTH MANAGEMENT  
PLANNING & DEVELOPMENT DIVISION  
1101 EAST FIRST STREET ROOM 2028  
SANFORD, FL 32771  
(407) 665-7441 PHONE (407) 665-7385 FAX  
www.seminolecountyfl.gov/gm**

12-06000027

SMALL SITE PLAN LESS THAN 2,500 SF: YES  NO

DREDGE & FILL: YES  NO

**APPLICANT INFORMATION** *(Related Proj# 2050003)*

APPLICANT: Mckee Construction Co.		CONTACT: Bobby Von Herbulis	
ADDRESS: 790 Monroe Road			
CITY: Sanford	STATE: Florida	ZIP: 32771	
PHONE: (407) 323-1150	FAX: (407) 323-9304	EMAIL: bobbyv@mckeeconstructionco.com	

**CONSULTANT INFORMATION**

ENGINEER: Tannath Design, Inc.		CONTACT: Bryan Potts, P.E.	
ADDRESS: 2494 Rose Spring Drive			
CITY: Orlando	STATE: Florida	ZIP: 32825	
PHONE: (407) 982-9878	FAX: (407) 208-1425	EMAIL: bpotts@tannathdesign.com	

**OWNER INFORMATION**

Is Owner's Authorization Attached? YES  NO

OWNER: Southern Pride LLC		CONTACT: David Hodgman	
ADDRESS: <del>4240 Church Street, Suite 1156</del> 950 Monroe Rd			
CITY: Sanford	STATE: Florida	ZIP: 32771	
PHONE:	FAX:	EMAIL:	

**SITE INFORMATION**

PARCEL ID #: 16-19-30-5AC-0000-(0120), (0260), (026A), (026F), (026G)			
PROJECT NAME: Donnie Myers RV Ph2			
DESCRIPTION OF PROJECT: Second Phase of Warehouse and office project.			
INTENDED USE OF PROPERTY: Office and RV modification Facilities			
LOCATION: 950 Monroe Road, Sanford FL 32771			
ZONING: PCD	FUTURE LAND USE: HIPTI	TOTAL ACREAGE: 11.18	BCC DISTRICT: 5

**UTILITIES**

WATER PROVIDER: Seminole	SEWER PROVIDER: Seminole
IS PROPERTY SERVED BY WELL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IS PROPERTY SERVED BY SEPTIC? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	FEE ATTACHED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

**ARBOR**

ARE ANY TREES BEING REMOVED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARBOR PERMIT APPLICATION ATTACHED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	FEE ATTACHED: YES <input type="checkbox"/> NO <input type="checkbox"/>

*no per Bobby V.*  
*[Signature]*

**ADDITIONAL SITE INFORMATION**

Phase II

IMPERVIOUS SURFACE AREA :				
BUILDING AREA:		EXISTING:		NEW: 43,551
PAVEMENT AREA:		EXISTING:		NEW: 82,618
IF DREDGE & FILL, HOW MANY CUBIC YARDS OF FILL IS PROPOSED? N/A				

**FEES**

SMALL SITE PLAN OR FILL:	\$200.00
DREDGE & FILL:	\$650.00
REGULAR SITE PLAN : <i>Sq. ft. of all NEW Impervious Surfaces (rounded to 2 decimal points)</i>	
To calculate regular site plan application fee, please use the formula below or the fee calculator <a href="http://www.seminolecountyfl.gov/gm/pd_calc.asp">http://www.seminolecountyfl.gov/gm/pd_calc.asp</a>	Fee Amount: \$ 3,540.00
$\Sigma \quad \$1000+ \left[ \frac{\text{New Impervious}}{1000} \right] \times \$20 = \text{Fee Amount}$	

**CONCURRENCY REVIEW MANAGEMENT SYSTEM: (Please check one.)**

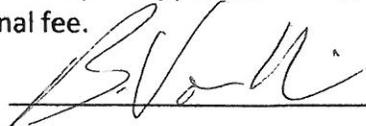
<http://www.seminolecountyfl.gov/gm/devrev/concurrency.asp>

I elect to defer the Concurrency Review determination for the above listed property until a point as late as Final Engineering Submittal. (Minor Plat and Final Engineering require Concurrency Test Review.) I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future.

I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued and unexpired Certificate of Vesting or prior Concurrency determination as identified below: (Please attach a copy of the Certificate of Vesting or Prior Test/Concurrency Notice.)  
Vesting Certificate/Test Notice Number: \_\_\_\_\_ Date issued: \_\_\_\_\_  
**Already submitted with FMP**

Concurrency Application and appropriate fee is attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management Monitoring System.

I understand that the application for site plan review must include all required submittals as specified in Chapter 40, Part 4, of the Seminole County Land Development Code. Submission of incomplete plans may create delays in review and plan approval. The review fee provides for two plan reviews. Additional reviews will require an additional fee.

Applicant's Signature:  Date: 5/3/12

OFFICIAL USE	
PROJECT #:	PLANNER ASSIGNED:

SEMINOLE COUNTY  
**APPLICATION & AFFIDAVIT**

**Ownership Disclosure Form**

The owner of the real property associated with this application is a (check one)

- Individual                       Corporation                       Land Trust  
 Limited Liability Company     Partnership  
 Other (describe): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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	ADDRESS	PHONE NUMBER

(Use additional sheets for more space.)

2. For each **corporation**, list the name, address, and title of each officer; the name and address of each director of the corporation; and the name and address of each shareholder who owns two percent (2%) or more of the stock of the corporation. Shareholders need not be disclosed if a corporation's stock are traded publicly on any national stock exchange.

NAME	TITLE OR OFFICE	ADDRESS	% OF INTEREST

(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 and the percentage of interest of each beneficiary. If any trustee or beneficiary of a trust is a corporation, please provide the information required in paragraph 2 above.

Trust Name: \_\_\_\_\_

NAME	TRUSTEE OR BENEFICIARY	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

4. For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

NAME	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

5. For each **limited liability company**, list the name, address, and title of each manager or managing member; and the name and address of each additional member with two percent (2%) or more membership interest. If any member with two percent (2%) or more membership interest, manager, or managing member is a corporation, trust or partnership, please provide the information required in paragraphs 2, 3 and/or 4 above.

NAME	TITLE	ADDRESS	% OF INTEREST
David Hodgman	MGRM	950 Monroe Rd. 4240 Church Street, Ste 1156 Sanford, FL 32771	100%

(Use additional sheets for more space.)

6. In the circumstances of a **contract for purchase**, list the name and address of each contract purchaser. If the purchaser is a corporation, trust, or partnership, provide the information required for those entities in paragraphs 2, 3, and/or 4 above.

Name of Purchaser: \_\_\_\_\_

NAME	ADDRESS	% OF INTEREST

Date of Contract: \_\_\_\_\_

Please specify any contingency clause related to the outcome of the consideration of the application.

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.
7. 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.

5/3/12  
Date

Bobby VonHerbulis  
Owner, Agent, Applicant Signature

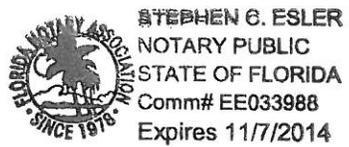
STATE OF FLORIDA  
COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me this 3rd day of May, 2012 by Robert F. VonHerbulis

Stephen C. Esler  
STEPHEN C. ESLER  
Signature of Notary Public

STEPHEN C. ESLER  
Print, Type or Stamp Name of Notary Public

Personally Known  OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_



<b>For Use by Planning &amp; Development Staff</b>	
Date: _____	Application Number: _____

**SEMINOLE COUNTY GROWTH MANAGEMENT DEPARTMENT**



PLANNING & DEVELOPMENT DIVISION  
 1101 EAST FIRST STREET ROOM 2028  
 SANFORD, FL 32771  
 (407) 665-7441 PHONE  
 (407) 665-7385 FAX

APPL # Z 2012-006  
 PROJ # 12-20500004  
 FLUA # 2012-FLUM-LS.01

**APPLICATION TO THE SEMINOLE COUNTY  
 PLANNING & ZONING COMMISSION / LOCAL PLANNING AGENCY AND BOARD OF COMMISSIONERS**

Applications to the Seminole County Planning & Zoning Commission / Local Planning Agency and Board of County Commissioners shall include **all applicable items listed in the Application Submittal Checklist**. No application will be scheduled for Development Review Committee (DRC) consideration until a complete application (including all information requested below) has been received by the Growth Management Department, Planning & Development Division.

**APPLICATION SUBMITTAL CHECKLIST:** **\*\*THIS BOX FOR STAFF USE ONLY\*\***

COPY OF PRE-APPLICATION REVIEW INFORMATION, IF APPLICABLE

PROPERTY OWNER PRINTOUT FROM PROPERTY APPRAISER'S WEBSITE

PROPERTY OWNER'S AUTHORIZATION FORM (ADDITIONAL DOCUMENTATION REQUIRED IF OWNER IS A TRUST OR CORPORATION)

OWNERSHIP DISCLOSURE FORM

SCHOOL IMPACT ANALYSIS (CONTACT SCHOOL BOARD FOR APPLICATION)

CONCURRENCY APPLICATION/DEFERRAL AFFIDAVIT AND FEE IF REQUIRED \$ \_\_\_\_\_

BOUNDARY SURVEY (2 COPIES)

ELECTRONIC LEGAL DESCRIPTION IN DIGITAL WORD FORMAT (COMPACT DISK OR EMAIL ONLY)

PUD/PCD FINAL MASTER/SITE PLAN REQUIRES A DRAFT DCA IN DIGITAL WORD FORMAT (COMPACT DISK OR EMAIL ONLY)

REZONING TO PUD, PCD, OP, RP, RM-2, RM-3, R-3, R-3A, R-4 AND MYRTLE STREET CONSERVATION VILLAGE REQUIRES 16 FULL-SIZE SETS OF SITE PLANS OR MASTER PLANS AND AN 11" X 17" PDF FILE (COMPACT DISK OR EMAIL ONLY)

APPLICATION FEE \$ \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF STAFF PROJECT MANAGER CERTIFYING THAT THE APPLICATION IS SUFFICIENT (EDS)

**APPLICATION TYPE - PLEASE CHECK ALL THAT APPLY**

- LARGE SCALE FUTURE LAND USE AMENDMENT (LSFLUA) FROM: SE TO: PD
- SMALL SCALE FUTURE LAND USE AMENDMENT (SSFLUA) FROM: \_\_\_\_\_ TO: \_\_\_\_\_
- PLANNED DEVELOPMENT AMENDMENT TO EXISTING PD (LS/SSFLUA) FROM: \_\_\_\_\_ TO: \_\_\_\_\_

*[NOTE: ATTACHMENT "A" AND ALL SUPPORT MATERIALS MUST BE SUBMITTED FOR LAND USE AMENDMENTS ABOVE]*

- REZONING (WITHOUT SITE PLAN) FROM: \_\_\_\_\_ TO: \_\_\_\_\_
- REZONING TO PUD, PCD, OP, RP, RM-2, RM-3, R-3, R-3A, or R-4 FROM: A-1 TO: PUD
- PUD/PCD MAJOR AMENDMENT
- PUD/PCD MINOR AMENDMENT
- PUD FINAL MASTER PLAN
- DEVELOPMENT OF REGIONAL IMPACT NOPC
- MYRTLE STREET CONSERVATION VILLAGE

**PROPERTY OWNER / AUTHORIZED AGENT INFORMATION**

<b>PROPERTY OWNER</b>	<b>AUTHORIZED AGENT *</b>
NAME	Information Below Taylor Morrison of Florida, Inc.
IF THE OWNER IS A CORPORATION OR TRUST, GIVE THE NAME AND TITLE OF THE PERSON WHO CAN LEGALLY SIGN ON BEHALF OF THE CORPORATION AND PROVIDE DOCUMENTATION THAT THEY HAVE LEGAL AUTHORITY :	
ADDRESS	01-20-29-501-0000-001A, -001C & 0020 Kirk W K Jr & Kirk Nancy C & Kirk John S ET AL PO Box 1873, Orlando, FL 32802-1873  01-20-29-501-0000-001B 243 Dutton Interests LLC 1275 Lake Heathrow Lane Heathrow, FL 32746
PHONE 1	151 Southhall Lane Suite 200 Maitland, FL 32751  407-629-0077
PHONE 2	
FAX	407-670-1448
E-MAIL	ctyree@taylormorrison.com

If you have a consultant that is not listed on the application and you would like us to contact them directly and give them the DRC comments, provide their contact information on a separate sheet, otherwise any questions and/or comments will be directed to the property owner or authorized agent listed above.

\* Proof of property owner's authorization is required with submittal if signed by authorized agent.

**NAME AND PHONE NUMBER OF PERSON WHO WILL POST PLACARD** Chad Moorhead,  
Madden, Moorhead + Glunt, Inc. 407-629-8330 chad@madden-eng.com

**PROJECT INFORMATION**

<b>PROJECT NAME</b>	Coventry at Heathrow
<b>SITE ADDRESS</b>	Banana Lake Road
<b>BCC DISTRICT</b>	5 - Carey Fork
<b>EXISTING USE(S)</b>	vacant
<b>PROPOSED USE(S)</b>	single family residential
<b>PROPERTY ID NUMBER(S)</b>	01-20-29-501-0000-001A, -001B, -001C + -0020
<b>SIZE OF PROPERTY</b>	32.37 acres
<b>GENERAL LOCATION</b>	West side of Banana Lake Rd. / South of CR 46A
<b>SOURCE OF WATER</b>	Seminole County
<b>SOURCE OF SEWER</b>	Seminole County
<b>RECLAIM PROVIDER</b>	Seminole County

**CONCURRENCY REVIEW MANAGEMENT SYSTEM (PLEASE CHECK ONE)**

<input checked="" type="checkbox"/>	I elect to defer the Concurrency Review that is required by Chapter 163, Florida Statutes, per Seminole County's Comprehensive Plan for the above listed property until a point as late as Site Plan and/or Final Engineering submittals for this proposed development plan. I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future. PCD Final Site Plan/PCD Final Site Plan Amendment may not defer.	
	I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued Certificate of Vesting or a prior Concurrency determination (Test Notice issued within the past (two years) as identified below: (Please attach a copy of the Certificate of Vesting or Test Notice.)	
	<b><u>TYPE OF CERTIFICATE:</u></b>  VESTING:  TEST NOTICE:	<b><u>CERTIFICATE NUMBER:</u></b>  CV- _____  _____
	<b><u>DATE ISSUED:</u></b>  _____  _____	
	Concurrency Application and appropriate fee are attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and the full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management monitoring system.	

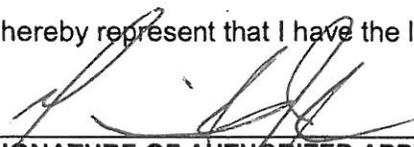
**By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge, and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of this application and / or revocation of any approval based upon this application.**

I hereby authorize County staff to enter upon the subject property at any reasonable time for the purposes of investigating and reviewing this request. I also hereby agree to place a public notice sign (placard) on the subject property at a location(s) to be determined by County staff.

I further acknowledge that Seminole County may not defend any challenge to my proposed future land use amendment / rezoning and related development approvals, and that it may be my sole obligation to defend any and all actions and approvals, which authorize the use or development of the subject property. Submission of this form initiates a process and does not imply approval by Seminole County or any of its boards, commissions or staff.

I further acknowledge that I have read the information contained in this application form pertaining to proposed amendments to the official zoning map, official Future Land Use map, and / or comprehensive plan and have had sufficient opportunity to inquire with regard to matters set forth therein and, accordingly, fully understand all applicable procedures and matters relating to this application.

I hereby represent that I have the lawful right and authority to file this application.

X  \_\_\_\_\_ DATE 3/30/13

**SIGNATURE OF AUTHORIZED APPLICANT\***

**DATE**

\*Proof of property owner's authorization is required with submittal if signed by someone other than the property owner.

Maurice Johnson

**PRINT OR TYPE NAME**

6/14/12  
PIC  
CDS

12-06000026



SEMINOLE COUNTY GROWTH MANAGEMENT  
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www.seminolecountyfl.gov/gm

RECEIVED MAY 04 2012

SMALL SITE PLAN LESS THAN 2,500 SF: YES  NO

DREDGE & FILL: YES  NO

**APPLICANT INFORMATION** Reference Pre-app 11-80000072

APPLICANT: WindCrest Development Group, Inc.	CONTACT: Tom Murray, P.E.
ADDRESS: 605 E. Robinson Street, Suite: 340	
CITY: Orlando	STATE: Florida ZIP: 32801
PHONE: (407) 219-3540	FAX: (407) 219-3541 EMAIL: tmurray@windcrestinc.com

**CONSULTANT INFORMATION**

ENGINEER: Kimley-Horn and Assoc.	CONTACT: Jay R. Jackson
ADDRESS: 3660 Maguire Blvd., Ste. 200	
CITY: Orlando	STATE: Florida ZIP: 32803
PHONE: (407) 898-1511	FAX: (407) 894-4791 EMAIL: jay.jackson@kimley-horn.com

**OWNER INFORMATION**

Is Owner's Authorization Attached? YES  NO

OWNER:	CONTACT:
ADDRESS:	
CITY:	STATE: ZIP:
PHONE:	FAX: EMAIL:

**SITE INFORMATION**

PARCEL ID #: 03-21-29-300-009D-0000
PROJECT NAME: Publix - Longwood
DESCRIPTION OF PROJECT: Demo existing Publix and Replace with new 49,533 SF Publix
INTENDED USE OF PROPERTY: Commercial
LOCATION: Northwest corner of SR 434 & Wekiva Springs Road
ZONING: C-1 FUTURE LAND USE: Com TOTAL ACREAGE: 5.70 BCC DISTRICT: 3

**UTILITIES**

WATER PROVIDER: Utilities, Inc. ✓	SEWER PROVIDER: Utilities, Inc. ✓
IS PROPERTY SERVED BY WELL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IS PROPERTY SERVED BY SEPTIC? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	FEE ATTACHED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

**ARBOR**

ARE ANY TREES BEING REMOVED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARBOR PERMIT APPLICATION ATTACHED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	FEE ATTACHED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

Progress Egn  
Embarg

**ADDITIONAL SITE INFORMATION**

IMPERVIOUS SURFACE AREA :					
BUILDING AREA:		EXISTING:	54,597 SF	NEW:	49,533 SF
PAVEMENT AREA:		EXISTING:	167,650 SF	NEW:	157,850 SF
IF DREDGE & FILL, HOW MANY CUBIC YARDS OF FILL IS PROPOSED?					

**FEES**

SMALL SITE PLAN OR FILL:	\$200.00
DREDGE & FILL:	\$650.00
REGULAR SITE PLAN : <i>Sq. ft. of all NEW Impervious Surfaces (rounded to 2 decimal points)</i>	
To calculate regular site plan application fee, please use the formula below or the fee calculator <a href="http://www.seminolecountyfl.gov/gm/pd_calc.asp">http://www.seminolecountyfl.gov/gm/pd_calc.asp</a>	Fee Amount: \$ 1,000
$\Sigma$ \$1000+ $\left[ \frac{\text{New Impervious}}{1000} \right] \times \$20$	= Fee Amount

**CONCURRENCY REVIEW MANAGEMENT SYSTEM: (Please check one.)**

<http://www.seminolecountyfl.gov/gm/devrev/concurrency.asp>

I elect to defer the Concurrency Review determination for the above listed property until a point as late as Final Engineering Submittal. (Minor Plat and Final Engineering require Concurrency Test Review.) I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future.

I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued and unexpired Certificate of Vesting or prior Concurrency determination as identified below: (Please attach a copy of the Certificate of Vesting or Prior Test/Concurrency Notice.) Vesting Certificate/Test Notice Number: \_\_\_\_\_ Date issued: \_\_\_\_\_

Concurrency Application and appropriate fee is attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management Monitoring System.

I understand that the application for site plan review must include all required submittals as specified in Chapter 40, Part 4, of the Seminole County Land Development Code. Submission of incomplete plans may create delays in review and plan approval. The review fee provides for two plan reviews. Additional reviews will require an additional fee.

Applicant's Signature:  Date: 4/11/12

<b>OFFICIAL USE</b>	
PROJECT #:	PLANNER ASSIGNED:



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**CHECKLIST FOR SITE PLAN REVIEW**

*Applicant's Initial*      **APPLICATION SUBMITTAL CHECKLIST**      *Staff's Initial*

\_\_\_\_\_ Dated copy of School Impact Analysis submitted to the School Board  
 (Residential Projects Only) \_\_\_\_\_

BA \_\_\_\_\_ Transmittal Letter \_\_\_\_\_

BA \_\_\_\_\_ Completed Application \_\_\_\_\_

BA \_\_\_\_\_ Fee-Check# 1019 \_\_\_\_\_ Amount: \$1,000.00 \_\_\_\_\_

\_\_\_\_\_ Concurrency Application \_\_\_\_\_

\_\_\_\_\_ Fee-Check# \_\_\_\_\_ Amount: \_\_\_\_\_

BA \_\_\_\_\_ Arbor Application \_\_\_\_\_

BA \_\_\_\_\_ Fee-Check# 1983 \_\_\_\_\_ Amount: \$150.00 \_\_\_\_\_

\_\_\_\_\_ Health Department Fees \_\_\_\_\_

\_\_\_\_\_ Fee-Check# \_\_\_\_\_ Amount: \_\_\_\_\_

BA \_\_\_\_\_ Complete sets of Site Plan (12 folded copies) \_\_\_\_\_

BA \_\_\_\_\_ Landscape plans BA attached \_\_\_\_\_

\_\_\_\_\_ Lighting plans \_\_\_\_\_ attached, (if applicable) \_\_\_\_\_

BA \_\_\_\_\_ Irrigation plans BA attached \_\_\_\_\_

\_\_\_\_\_ Stormwater Calculations (2 copies) \_\_\_\_\_

\_\_\_\_\_ Soils Report (2 copies) (if applicable) \_\_\_\_\_

\_\_\_\_\_ Lift Station Calculations (2 copies) (if applicable) \_\_\_\_\_

\_\_\_\_\_ Traffic and Engineering Report (2 copies) \_\_\_\_\_

Staff's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICIAL USE**

PROJECT#: \_\_\_\_\_

PLANNER: \_\_\_\_\_