Variance Application:

VAR 24-0167

LUHO Hearing Date:

January 22, 2024

Case Reviewer: Camille Krochta



Development Services Department

Applicant: Sergio Ramos Zoning: RSC-6

Address/Location: 8419 Woodhurst Dr. Tampa, FL 33615 Folio: 5049.1262

Request Summary:

The Applicant is requesting a variance to Community Residential Home distance separation requirements on property zoned RSC-6.

Requested Variances:				
LDC Section:	LDC Requirement:	Variance:	Result:	
6.11.28.A	Community Residential Homes housing 6 or fewer residences shall not be located within a radius of 1,000 feet of another such existing home with 6 or fewer residents.	680 feet	320-foot distance separation to an existing Community Residential Home	

During a Community Residential administrative zoning verification review, ZV 23-0899, it was discovered that there was an existing CRH Type A within the 1,000-foot radius necessitating the variance. The existing facility is located at 8507 Woodburn Ct.

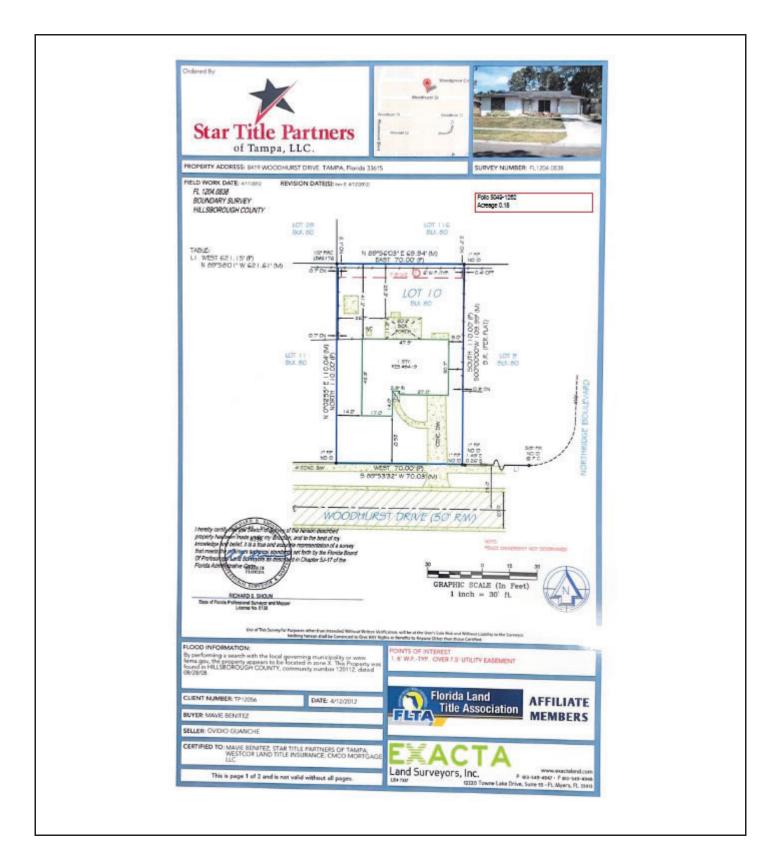
Zoning Administrator Sign-Off:

Colleen Marshall Mon Jan 8 2024 08:58:38

DISCLAIMER:

The variance(s) listed above is based on the information provided in the application by the applicant. Additional variances may be needed after the site has applied for development permits. The granting of these variances does not obviate the applicant or property owner from attaining all additional required approvals including but not limited to subdivision or site development approvals and building permit approvals.

SURVEY/SITE PLAN



APPLICATION NUMBER: VAR 24-0167

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SURVEY/SITE PLAN



The second CRH Type A located at 8507 Woodburn Ct.
Approximately 320 +/- from the Applicant's proposed CRH.





Additional / Revised Information Sheet

Application Number:	Office Use Only Received Date:	Received By:
The following form is required when subr must be submitted providing a summary	nitted changes for any application of the changes and/or additional new folio number(s) added. Additional	that was previously submitted. A cover letter information provided. If there is a change in ionally, the second page of this form must be
Application Number: VAR 24-0	67 Applicant's Name:	Sergio Ramos
Reviewing Planner's Name: Camille	e Krochta	Date: 12/20/2023
_	Modification/Personal Appearance opment of Regional Impact (DRI) tional Use (CU)	e (PRS) Standard Rezoning (RZ) Major Modification (MM) Other
Current Hearing Date (if applicable):		
Important Project Size Change Info Changes to project size may result in a new Will this revision add land to the project? If "Yes" is checked on the above please ens	hearing date as all reviews will be Yes No	
Will this revision remove land from the pr If "Yes" is checked on the above please ensu	oject? 🔲 Yes 🔀 No	
Email this form along with a	ıll submittal items indicated on ZoningIntake-DSD@hcflgov.ne	the next page in pdf form to:
	should be submitted in one email	em should be submitted as a separate file with application number (including prefix)
For additional help and submittal ques	stions, please call (813) 277-1633 (or email ZoningIntake-DSD@hcflgov.ne <u>t</u> .
I certify that changes described above are will require an additional submission and		made to the submission. Any further changes $ \mathcal{L} \partial_{\mathcal{O}} \partial_{\mathcal{O}} \partial_{\mathcal{O}}$
Signature		Date



Identification of Sensitive/Protected Information and Acknowledgement of Public Records

Pursuant to <u>Chapter 119 Florida Statutes</u>, all information submitted to Development Services is considered public record and open to inspection by the public. Certain information may be considered sensitive or protected information which may be excluded from this provision. Sensitive/protected information may include, but is not limited to, documents such as medical records, income tax returns, death certificates, bank statements, and documents containing social security numbers.

While all efforts will be taken to ensure the security of protected information, certain specified information, such as addresses of exempt parcels, may need to be disclosed as part of the public hearing process for select applications. If your application requires a public hearing and contains sensitive/protected information, please contact Hillsborough County Development Services to determine what information will need to be disclosed as part of the public hearing process.

Additionally, parcels exempt under <u>Florida Statutes §119.071(4)</u> will need to contact <u>Hillsborough County Development Services</u> to obtain a release of exempt parcel information.

Are you seeking an exemption from public disclosure of selected information submitted with your application pursuant

to Chapter	119 FS? Yes No		
l hereby cor	onfirm that the material submitted with a Includes sensitive and/or protected in		-0167
	Type of information included and loca		
Ø	Does not include sensitive and/or pro-		
lf an exemp	Sensitive/protected information will not be acception is being sought, the request will be from public view. Also, by signing this f	reviewed to determine if the a	pplicant can be processed with the data
10.000	ablic information if not required by law to		nd an information in the submittal win
Signature:	(Must be signed by	applicant or authorized represent	tative)
Intake Staff	Signature:	4555	Date:



Additional / Revised Information Sheet

Please indicate below which revised/additional items are being submitted with this form.

In	cluded	Submittal Item
1		Cover Letter*+ If adding or removing land from the project site, the final list of folios must be included
2		Revised Application Form*+
3		Copy of Current Deed* Must be provided for any new folio(s) being added
4		Affidavit to Authorize Agent* (If Applicable) Must be provided for any new folio(s) being added
5		Sunbiz Form* (If Applicable) Must be provided for any new folio(s) being added
6		Property Information Sheet*+
7		Legal Description of the Subject Site*+
8		Close Proximity Property Owners List*+
9		Site Plan*+ All changes on the site plan must be listed in detail in the Cover Letter.
10		Survey
11		Wet Zone Survey
12		General Development Plan
13		Project Description/Written Statement
14		Design Exception and Administrative Variance requests/approvals
15		Variance Criteria Response
16		Copy of Code Enforcement or Building Violation
17		Transportation Analysis
18		Sign-off form
19	\boxtimes	Other Documents (please describe):
		Revised narrative to include facility

3 02/2022

^{*}Revised documents required when adding land to the project site. Other revised documents may be requested by the planner reviewing the application.

⁺Required documents required when removing land from the project site. Other revised documents may be requested by the planner reviewing the application.

Hillsborough County Florida

Project Description (Variance Request)

In the space below describe the variance including any history and/or related facts that may be helpful in understanding the request. This explanation shall also specifically identify what is being requested (e.g. Variance of 10 feet from the required rear yard setback of 25 feet resulting in a rear yard of 15 feet). If additional space is needed, please attach extra pages to this application. We have submitted a zoning request to convert this residential property into a residential assisted living facility. We already own one facility in Town and Country (Ocean Breeze ALF) and would like to expand based on demand from our community. Based on our research: DCF found 0 facilities within 1,000-1,200 feet. AHCA found 0 facilities within 1,000 feet. APD identified during the zoning review a CRH located at 8507 Woodburn Ct. within 320 feet We are asking for a variance of 320 feet of distance. 2. A Variance is requested from the following Section(s) of the Hillsborough County Land Development Code: Zoning **Additional Information** No. Yes 1. Have you been cited by Hillsborough County Code Enforcement? If yes, you must submit a copy of the Citation with this Application. 2. Do you have any other applications filed with Hillsborough County that are related to the subject property? No. If yes, please indicate the nature of the application and the case numbers assigned to the application (s): 3. Is this a request for a wetland setback variance? └**│** Yes If yes, you must complete the Wetland Setback Memorandum and all required information must be included with this Application Packet. 4. Please indicate the existing or proposed utilities for the subject property: Public Water ` Public Wastewater Septic Tank Private Well 5. Is the variance to allow a third lot on well or non-residential development with an intensity of three ERC's?

claimed Water – Service Application Conditional Approval – Reservation of Capacity" prior to your public hearing

If yes, you must submit a final determination of the "Water, Wastewater, and/or Re-

Application No:	24-0167
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those suffered in common with other property similarly located?

would be affected by allowance of the variance.

negative impact in our community.

Variance Criteria Response

	Based on our previous review of the area zoning platforms, there are no other assisted living facilitues located within the mandatory 1,000 ft. buffer area.
2.	Describe how the literal requirements of the Land Development Code (LDC) would deprive you of rights commonly enjoyed by other properties in the same district and area under the terms of the LDC.
	Based on our previous review of the area zoning platforms, there are no other assisted living facilitues located within the mandatory 1,000 ft. buffer area. Therefore, not allowing us to move forward with the project, deprives us from extending our services.
3.	Explain how the variance, if allowed, will not substantially interfere with or injure the rights of others whose property

1. Explain how the alleged hardships or practical difficulties are unique and singular to the subject property and are not

4. Explain how the variance is in harmony with and serves the general intent and purpose of the LDC and the Comprehensive Plan (refer to Section 1.02.02 and 1.02.03 of the LDC for description of intent/purpose).

We have ran another assisted living facility in Town and Country for the past three years successfully. We have rules and regulations in place in order to ensure that we do not have a

We would implement rules and regulations in harmony with the LDC in ordr to ensure that we do not interfere with harmonius and orderly living for our community and nearing residences.

5. Explain how the situation sought to be relieved by the variance does not result from an illegal act or result from the actions of the applicant, resulting in a self-imposed hardship.

An assisted living facility is regulated by the Agency for Healthcare Administration, Hillsborough County Health Department, and Hillsborough County Fire Marshall. We are held to yearly inspections of the property and facility, ensuring all mandates and codes are appropriately followed. Our intent is to solely be able to be able to extend our services to the elder community based on their demands.

6. Explain how allowing the variance will result in substantial justice being done, considering both the public benefits intended to be secured by the LDC and the individual hardships that will be suffered by a failure to grant a variance.

Allowing us the variance will allow us to expand our services to the elder community. The elder population is in desperate need of affordable and appropriate care. As owners of a 5-star facility, we have been able to do just that for the last three years. Our purpose is to continue to provide excellent services and piece of mind for our community.



INSTRUMENT#: 2012203999, BK: 21177 PG: 1420 PGS: 1420 - 1420 06/12/2012 at 10:25:06 AM, DOC TAX PD(F.S.201.02) \$875.00 DEPUTY CLERK: SMEANY Pat Frank, Clerk of the Circuit Court Hillsborough County

Prepared by:

Star Title Partners of Tampa, LLC 3450 Buschwood Park Drive, Suite 345 Tampa, Florida 33618

File Number: TP12056

General Warranty Deed

Made this May 4, 2012 A.D. By Ovidio Guanche, Jr and Stacey E. Guanche, husband and wife, whose address is: 8419 Woodhurst Drive, Tampa, Florida 33615, hereinafter called the grantor, to Mavie Benitez, whose post office address is: 8419 Woodhurst Drive, Tampa, Florida 33615, hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of One Hundred Twenty Five Thousand dollars & no cents (\$125,000.00) 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 Hillsborough County, Florida, viz:

Lot 10, Block 80, Town 'N Country Park Unit No. 38, according to the plat thereof, recorded in Plat Book 43, Page(s) 42, of the Public Records of Hillsborough County, Florida.

Parcel ID Number: 0050491262

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise 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 31, 2011.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:	PTA NOP	PIL
Mate	Ovidio Guanche, Jr	_(Seal)
Witness Printed Name MIG OFFIZ	Address: 8419 Woodhurst Drive, Tampa, Florida 33615	
JA-172 - UA	Stacy & Avauche Stacey E. Guanche	_(Seal)
Witness Printed Name KENNETH N. ROSSI	Address: 8419 Woodhurst Drive, Tampa, Florida 33615	P.
State of Florida County of Hillsborough	/ IFIED OPY	1/1/
The foregoing instrument was acknowledged before me this 4th husband and wife, who is/are personally known to me or who has		Guanche, as
identification.	Made	
VVC2	Print Name:	-
MIA ELIZABETH ORTIZ	My Commission Expires:	\ \ \
MIA ELIZABET MY COMMISSION # EE188092 MY COMMISSION # EE188092 EXPIRES February 21, 2016 EXPIRES February 21, 2016	FIED	1//

OPY TIFIED

DEED Individual Warranty Deed - Legal on Face



Received 11/16/2023



Submittal Requirements for Applications Requiring Public Hearings

Application No: 24-0167 Hearing(s) and type: Date: 01/22/2024 Date:	Official Use Only Type: LUHO Type:	Intake Date: 11/16/2023 Receipt Number: 321173 Intake Staff Signature: Alejandra Prac
Applicant/Representative: Sergio Ramos		Phone:(813) 767-7969
Representative's Email: oceanbreeze_alf(@yahoo.com	

The following information is used by reviewing agencies for their comments and should remain constant, with very few exceptions, throughout the review process. Additional reviews, such as legal description accuracy, compatibility of uses, agency reviews, etc., will still be conducted separately and may require additional revisions.

The following ownership information must be provided and will verified upon submission initial submittal. If you are viewing this form electronically, you may click on each underlined item for additional information.

Part A: Property Information & Owner Authorization Requirements

Inc	luded	N/A	Requirements
1	\times		Property/Applicant/Owner Information Form
2	X		Affidavit(s) to Authorize Agent (if applicable) NOTE: All property owners must sign either the Application form or the Affidavit to Authorize Agent. If property is owned by a corporation, submit the Sunbiz information indicating that you are authorized to sign the application and/or affidavit.
3		\times	<u>Sunbiz Form</u> (if applicable). This can be obtained at <u>Sunbiz.org</u> .
4	X		<u>Property/Project Information Sheet</u> All information must be completed for each folio included in the request.
5	\times		Identification of Sensitive/Protected Information and Acknowledgement of Public Records
6	\times		Copy of Current Recorded Deed(s)
7	X		Close Proximity Property Owners List
8	X		Legal Description for the subject site
9		X	Copy of Code Enforcement/Building Code Violation(s) (if applicable)
10		\times	Fastrack Approval (if applicable)

Additional application-specific requirements are listed in Part B.



Property/Applicant/Owner Information Form

Official U	
Application No: 24-0167 Hearing(s) and type: Date: 01/22/2024 Type: LUF	Intake Date: 11/16/2023
	7// // //
Date: Type:	Intake Staff Signature. Vlayandra Prac
Property In	
Address: 8419 Woodhurst Dr.	City/State/Zip: Tallipa, Florida. 33013
28-17-26 Folio(s): 50491262 Zoning: RS	SC-6 Future Land Use: R-4 Property Size: 0.18
	er Information
Name: Mavie Benitez	Daytime Phone (813) 417-8203
Mavie Benitez Address: 19705 Spring Willow Ct.	ty/State/Zip: Odessa, Florida. 33556
cmail: oceanbreeze_alf@yahoo.c	OM Fax Number
	nformation
Sergio Ramos	Daytime Phone (813) 767-7969 (813) Odessa, Florida. 33556
19705 Spring Willow Ct	Odessa, Florida, 33556
Address: <u>10700 0pm.g</u> vm.d. c Email: oceanbreeze_alf@yahoo.c	om Fax Number (813) 243-8492
	ve (if different than above)
Name:	Daytime Phone
Address:C	ity/State/Zip:
Email:	Fax Number
I hereby swear or affirm that all the information provided in the submitted application packet is true and accurate, to the best of my knowledge, and authorize the representative listed above to act on my behalf on this application. Signature of the Applicant Sergio Ramos Type or print name	I hereby authorize the processing of this application and recognize that the final action taken on this petition shall be binding to the property as well as to the current and any future owners. Signature of the Owner(s) – (All parties on the deed must sign) Mavie Benitez Type or printiname



PARCEL INFORMATION HILLSBOROUGH COUNTY FLORIDA

Jurisdiction	Unincorporated County
Zoning Category	Residential
INFL	i
Zoning	RSC-6
Description	Residential - Single-Family Conventional
Flood Zone:X	AREA OF MINIMAL FLOOD HAZARD
FIRM Panel	0189H
FIRM Panel	12057C0189H
Suffix	Н
Effective Date	Thu Aug 28 2008
Pre 2008 Flood Zone	X500
Pre 2008 Firm Panel	1201120190D
County Wide Planning Area	Town and Country
Community Base Planning Area	Town and Country
Community Base Planning Area	Town and Country Focus
Census Data	Tract: 011612 Block: 2004
Future Landuse	R-4
Future Landuse	R-4
Future Landuse	R-4
Urban Service Area	USA
Water Interlocal	City of Tampa Water
Mobility Assessment District	Urban
Mobility Benefit District	1
Fire Impact Fee	Northwest
Parks/Schools Impact Fee	NORTHWEST
ROW/Transportation Impact Fee	ZONE 10
Wind Borne Debris Area	140 MPH Area
Aviation Authority Height Restrictions	150' AMSL
Competitive Sites	NO
Redevelopment Area	NO



Folio: 5049.1262 PIN: U-26-28-17-0A5-000080-00010.0 Mavie Benitez Mailing Address: 12508 Twisted Oak Dr null Tampa, Fl 33624-5713

Site Address: 8419 Woodhurst Dr Tampa, Fl 33615 SEC-TWN-RNG: 26-28-17

Acreage: 0.176768 Market Value: \$301,522.00 Landuse Code: 0100 Single Family

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2. Any decision made or action taken or not taken by any person in reliance upon any information or data furnished hereunder.

