Marion County
Board of County Commissioners
Office of the County Engineer
412 SE 25th Ave.
Ocala, FL 34471
Phone: 352-671-8686
Fax: 352-671-8687

DEVELOPMENT REVIEW COMMITTEE WAIVER REQUEST FORM

Date: _____ Parcel Number(s): 9027-0000-02 Permit Number: TBD

A. PROJECT INFORMATION: Fill in below as applicable:

Project Name: Fawn Lake Estates Commercial ☐ Residential ☑
Subdivision Name (if applicable): SSS Unit 27
Unit 27 Block * Lot * Tract *
*Refer to MCPA Parcel Card

B. PROPERTY OWNER'S AUTHORIZATION: The property owner's signature authorizes the applicant to act on the owner's behalf for this waiver request. The signature may be obtained by email, fax, scan, a letter from the property owner, or original signature below.

Name (print): Midway 65 LLC
Signature: _____
Mailing Address: 277 Midway Road City: Ocala
State: FL Zip Code: 34472 Phone # 352-266-7408
Email address: thawk1068@gmail.com

C. APPLICANT INFORMATION: The applicant will be the point of contact during this waiver process and will receive all correspondence.

Firm Name (if applicable): Tillman & Associates Engineering, LLC Contact Name: David Tillman or Jon Harvey
Mailing Address: 1720 SE 16th Avenue, Bldg 100 City: Ocala
State: FL Zip Code: 34471 Phone # 352-387-4540
Email address: Permits@Tillmaneng.com

D. WAIVER INFORMATION:
Section & Title of Code (be specific): Comprehensive Plan Policy 2.1.2. 1.
Reason/Justification for Request (be specific): Requesting to reduce 47.53 acres of 110.04 acres from HR to MR. Area requesting to be reduced to MR is primarily conservation area. As 110.04 acres, it is required to have 440 units on 62.51 acres. Development standards would require multi-family or townhouses which is not combatible with area. Project being proposed consists of 329 units. The step down would require minimum of 297 units. This is served by 2 lane roads and surrounded by detached SFR units. Same product is being proposed.

DEVELOPMENT REVIEW USE:
Received By: _____ Date Processed: _____ Project # _____ AR # _____

ZONING USE: Parcel of record: Yes ☐ No ☐ **Eligible to apply for Family Division: Yes ☐ No ☐**
Zoned: _____ ESOZ: _____ P.O.M. _____ Land Use: _____ **Plat Vacation Required: Yes ☐ No ☐**
Date Reviewed: _____ Verified by (print & initial): _____

Revised 6/2021