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: 9/29/25 Parcel Number(s): 05662-007-15 Permit Number: 2025092415

A. PROJECT INFORMATION: Fill in below as applicable:

Project Name: water main connection (well request) Commercial ☐ Residential ☑
Subdivision Name (if applicable): Buckskin Lake Manor
Unit -- Block 7 Lot 15-16 Tract --

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): Donald R Laturell
Signature: Don Laturell Digitally signed by Don Laturell Date: 2025.09.29 18:35:23 -04'00'
Mailing Address: 315 N Gaines St City: Oak Hill
State: FL Zip Code: 32759-9535 Phone # 484-553-4875
Email address:

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

Firm Name (if applicable): Contact Name: Donald R. Laturell
Mailing Address: 315 N Gaines St. City: Oak Hill
State: FL Zip Code: 32759 Phone # 484-553-4875
Email address: LMSELE@earthlink.net

D. WAIVER INFORMATION:
Section & Title of Code (be specific): 6.14.2.B(1)(a) - Water main connection
Reason/Justification for Request (be specific): Canvassed 10 residents of Buckskin Lake Manor. They are completely dissatisfied with the water quality. Many residents are even concerned about bathing in the MCU supplied water. NONE will drink the water. I have tasted the water from a well in the area - it is SIGNIFICANTLY better. For my health and the health of my wife I respectively request a waiver to better manage my potable water.

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