February 29, 2024

PROJECT NAME: 9022-0459-04 PROJECT NUMBER: 2019110129

APPLICATION: DRC WAIVER REQUEST #31206

DEPARTMENT: FRMSH - FIRE MARSHAL REVIEW REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO REMARKS: APPROVED

2 DEPARTMENT: LUCURR - LAND USE CURRENT REVIEW

REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO REMARKS: Defer to MCU

3 DEPARTMENT: ZONE - ZONING DEPARTMENT REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO REMARKS: Defer to MCU

4 DEPARTMENT: UTIL - MARION COUNTY UTILITIES REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO

REMARKS: MCU recommends approval; authorized for Consent agenda placement if no other departments

object to waiver.

5 DEPARTMENT: LSCAPE - LANDSCAPE DESIGN AND IRRIGATION

REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO

REMARKS: n/a

6 DEPARTMENT: 911 - 911 MANAGEMENT

REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO

REMARKS: N/A

7 DEPARTMENT: DOH - ENVIRONMENTAL HEALTH REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO

REMARKS: Must amend septic permit 42-SO-2668792 to change from public water supply to private well, new site plan required. Well must be 75' from all portions of septic system and 75' from all neighboring septic systems.

Well must be permitted through the Department of Health in Marion County.

8 DEPARTMENT: ENGDRN - STORMWATER REVIEW REVIEW ITEM: LDC 6.14.2.B(1)(a) - Water Connection

STATUS OF REVIEW: INFO

REMARKS: Defer to Marion County Utilities.

Note: Please ensure Contractor restores the ROW back to existing grade.



Marion County Board of County Commissioners

AR 31206

Office of the County Engineer

412 SE 25th Ave. Ocala, FL 34471 Phone: 352-671-8686 Fax: 352-671-8687 Complete this form and email IT and YOUR UTILITY MAP to DevelopmentReview@MarionFL.org then after sending, call 352-671-8686 to make payment for your \$300 application fee (service fee applies by phone).

DEVELOPMENT REVIEW COMMITTEE WAIVER REQUEST FORM

Date: 2/22/2024 Parcel Number(s): 9022-0459-04	Permit Number: 2023021455
A. PROJECT INFORMATION: Fill in below as applicable:	
Project Name: 9022-0459-04	Commercial Residential
Subdivision Name (if applicable): Silver Springs Shores	
Unit 22 Block 459 Lot 04 Tract	
B. PROPERTY OWNER'S AUTHORIZATION: The property of owner's behalf for this waiver request. The signature may be of owner, or original signature below.	
Name (print): JEN HOMES LLC	
Signature:	
Mailing Address: 3201 SW 84TH AVE STE 104	City: OCALA
State: FL Zip Code: 34474 Phone #352-237-62	266
Email address: sydnie@jenhome.net	
Firm Name (if applicable): Jen Homes LLC Mailing Address:3201 SW 34th Ave Ste. 104	Contact Name: Sydnie GibsonCity:Ocala
State FL Zip Code: 34471 Phone # 352-237	-6266
Email address:_sydnie@jenhome.net	-0200
D. WAIVER INFORMATION:	
Section & Title of Code (be specific): 6.1	4.2.B(1)(a) - Water Connection
Reason/Justification for Request (be specific): Water main exter	nsion applied for 2/14/23 and is not finalized. Home
is built, pending driveway and final inspections waiting on water	. Due to jack-and-bore, MCU advises several more
months before water can be bid & constructed. Homeowner is I	
is desperate to finalize. Requesting waiver to connect to public	water & install an onsite domestic well.
DEVELOPMENT REVIEW USE:	
Received By: Email 2/22/24 Date Processed: 2/22/24 BM	Project # 2019110129 AR # 31206
ZONING USE: Parcel of record: Yes □ No □ Elig Zoned: ESOZ: P.O.M Land Use:	ible to apply for Family Division: Yes ☐ No ☐ Plat Vacation Required: Yes ☐ No ☐
Date Reviewed:Verified by (print & initial):	

