PM: Annie



SEMINOLE COUNTY PROJ. #: 25-55200001
PLANNING & DEVELOPMENT DIVISION Received: 3/13/25

1101 EAST FIRST STREET, ROOM 2028

SANFORD, FLORIDA 32771 Paid: 3/17/25 (407) 665-7371 EPLANDESK@SEMINOLECOUNTYFL.GOV

SUBDIVISION

ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE

EE)							
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0							
SUBDIVISION NAME: Encore at Hillview							
NUMBER OF LOTS: 28 SINGLE FAMILY X TOWNHOMES COMMERCIAL INDUSTRIAL OTHER							
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16K							
TEK							
TEK							
1EK							
nek							

CONSULTANT	EPLAN PRIVILEGES: VII	EW ONLY UPLOAD NONE					
NAME: Kim Fischer	COMPANY: Cycorp						
ADDRESS: 1614 White Dove Drive							
CITY: Winter Springs	STATE: FL	ZIP: 32708					
PHONE: 407-405-7819	EMAIL: kim@cycorpengineers.com						
OWNER(S)							
NAME(S): Charles Sanders							
ADDRESS: 17732 Baywatch Ct NE							
CITY: Poulsbo	STATE: WA	ZIP: 98370-7308					
PHONE:	EMAIL:						
CONCURRENCY REVIEW MANAGEMENT S	YSTEM (SELECT ONE)						
I hereby declare and assert that the aforemention issues and unexpired Certificate of Vesting or procopy of the Certificate of Vesting or Prior Test/C	ed proposal and property ior Concurrency determin						
Vesting Certificate/Test Notice Number:		Date Issued:					
X 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.							
I elect to defer the Concurrency Review determ Engineering submittal. (Minor Plat and Final Er acknowledge that any proposed development Review and meet all Concurrency requirements)	ngineering require Concuon the subject property	rrency Test Review). I further specifically					
AS		3/13/2025					

SIGNATURE OF OWNER/AUTHORIZED AGENT (PROOF OF PROPERTY OWNER'S AUTHORIZATION IS REQUIRED IF SIGNED BY SOMEONE OTHER THAN THE PROPERTY OWNER)

DATE

OWNER AUTHORIZATION FORM

An authorized applicant is defined as: The property owner of record; or An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or Contract purchase (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed). Charles Sanders II , the owner of record for the following described property (Tax/Parcel ID Number) 22-21-29-300-0180-0000 Kim Fischer to act as my authorized agent for the filing of the attached application(s) for: Arbor Permit Final Engineering Construction Revision Final Plat ☐ Future Land Use Lot Split/Reconfiguration ☐ Minor Plat ☐ Special Event Preliminary Sub. Plan Rezone Site Plan ☐ Special Exception ☐ Vacate ☐ Variance Temporary Use \square Other (please list): OTHER: and make binding statements and commitments regarding the request(s). I certify that I have examined the attached application(s) and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments, and fees become part of the Official Records of Seminole County, Florida and are not returnable. Charles Sanders Property Owner's Printed Name STATE OF FLORIDA WAShington COUNTY OF KILSOR SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, appeared Charles E. SANDONS, II (property owner), \square by means of physical presence or \square online notarization; and \square who is personally known to me or \square who has produced <u>Driver Licesense</u> as identification, and who executed the foregoing instrument and sworn an oath on this 6 day of March , 20 24.

JOSEPH GALENO
NOTARY PUBLIC #23034478
STATE OF WASHINGTON
MY COMMISSION EXPIRES
02-12-27

Joseph Galeno, 1

Rev. 1/2020

Property Re or r



Pre 22-21-29-300-0180-0000

Property A ress HILLVIEW DR LT MONTE SPRINGS, FL 32714



2023 ertifie T x Summ ry

2023 T x Amount w/o Non-Hx p 2023 T x Bi Amount \$4,539.36 2023 T x S vings with Non-Hx p \$1,217.22

\$3,322.14

* Does NOT IN LUDE Non A V orem Assessments

Leg Des ription

SEC 22 T WP 21S RGE 29E BEG 25 FT N OF W 1/4 COR RUN N 443.36 FT E 328.18 FT S 443.36 FT W 328.73 TO BEG

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Taxes	<u></u>							
Taxing ri y			ssessmer	ı Val e	Exemp Val	es	Taxable Val e	
ROAD DISTRICT			\$	06,366		\$0	\$ 06,366	
SJWM(Saint Johns Water	er Management)		\$	06,366		\$0	\$ 06,366	
FIRE			\$	06,366		\$0	\$ 06,366	
COUNTY GENERAL FU	ND		\$	06,366		\$0	\$ 06,366	
Schools			\$	341,100		\$0	\$341,100	
Sales								
Descrip i n		Da e	B k	Page	m n	Q alified	Vac/Imp	
QUIT CLAIM DEED		10/05/ 0 1	10065	1 93	\$100	No	Improved	
WARRANTY DEED		0 /01/1999	0363	1860	\$18,900	No	Vacant	
WARRANTY DEED		05/01/199	0 537	1 45	\$ 8,000	No	Vacant	
WARRANTY DEED		0 /01/1985	01616	1015	\$39, 00	No	Vacant	
WARRANTY DEED		11/01/1984	01616	1014	\$15,000	No	Vacant	
WARRANTY DEED		10/01/1983	01497	0895	\$13,300	No	Vacant	
Land								
Me d		Fr n age	Dej		Uni s	Uni s Price	Land Val e	
ACREAGE					3.79	\$90,000.00	\$341,100	
B ilding Inf rr Permi s	mai n							
Permi # Descrip i n				gency	m n	CO Da e	Permi Da e	
1 51111 / Document				<u> </u>	***		1011111	
Ex ra Fea res	5							
Descrip i n			Year E	3 il	Uni s	Val e	New C s	
Z ning								
Z ning	Z ning Descri	ip i n	F	re Land Use	F	re Land Use De	escrip i n	
A-1	High Density R		Agri	icultural-1Ac				
U ili y Inf rma	i n							
Fire Sain P wer	P ne(nal g)	Wa er Pr vider	Sewer Pr v	ider Garbag	e Pick p Recy	cle Yard Wa	s e Ha Ier	
13.00 DUKE	CENTURY LINK	NA	NA	NA	NA	NA	NA	
P li ical Repre	senai n							
C mmissi ner	US C ngress	Sae H se		S a e Sena	e	V ing Precir	ıc	
Dist 3 - Lee Constantine	Dist 7 - Cory Mills	Dist 38 - DAVID	SMITH	Dist 10 - Jaso	n Brodeur	5		
Sc I Inf rm	a i n							
Elemen ary Sc I Dis	ric	Middle Sc I Dis r	ic		Hig Sc I Di	is ric		
Spring Lake		Teague			Lake Brantley			
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3/17/25 SEMINOLE COUNTY GOVERNMENT - PROJECT FEES RECEIPT09:42:07 RECEIPT # 0075500 PROJ # 25-55200001 OWNER: LOT #: 0000 JOB ADDRESS: *UNASSIGNED .00 4700.00 4700.00 FINAL SUBDIVISION TOTAL FEES DUE.......... 4700.00 AMOUNT RECEIVED....: 4700.00 * DEPOSITS NON-REFUNDABLE * ** THERE IS A PROCESSING FEE RETAINAGE FOR ALL REFUNDS ** BALANCE DUE....: .00 COLLECTED BY: DRHR01 CHECK NUMBER..... 00000011127 CASH/CHECK AMOUNTS...: 4700.00 CYCORP ENGINEERING INC

4 - FINANCE

DISTRIBUTION...... 1 - COUNTY 2 - CUSTOMER 3 -

COLLECTED FROM: