

Project Information

Application Number <u>029-MP-20</u>

Environmental Protection and Growth Management Department

PLANNING AND DEVELOPMENT MANAGEMENT DIVISION

1 N. University Drive, Box 102 \cdot Plantation, FL 33324 \cdot T: 954-357-6666 F: 954-357-6521 \cdot Broward.org/Planning

Development and Environmental Review Online Application

RD STIRLING						
Plat/Site Number	Plat Book - Page (if recorded)					
029-MP-20 NONE						
Owner/Applicant/Petitioner Name						
CF & A HILL FAMILY LTD						
Address	City	State	Zip			
261 SW 13th Street	Dania Beach	Dania Beach FL 330				
Phone Email	OT: 0 "					
	@TrippScott.com					
Agent for Owner/Applicant/Petitioner	Contact Person					
PULICE LAND SURVEYORS, INC.	Elizabeth Tsource		1 =			
Address	City	State	Zip			
5381 Nob Hill Road	Sunrise	FL	33351			
Phone Email						
	abeth@pulicelandsurveyo	rs.com				
Folio(s)	N Ar	Man Man				
51420400 0110 and 514204000120	, UC	5114 MOOD				
Location	Location					
South side of Stirling Road etherween/and S. Compass Way						
South side of Stirling Road	S. Compass Way	S. Bryan	Road			
South side of Stirling Road at/between/ar	S. Compass Way street name / side/corner	and/of S. Bryan				
South side of Stirling Road at/between/ar street name	na	and/01				
South side of Stirling Road at/between/ar street name Type of Application (this form required	street name / side/corner	and/01				
north side/corner north street name	street name / side/corner for all applications)	and/01				
Type of Application (this form required	street name / side/corner for all applications) tions for this form).	and/01				
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Type of Application (this form required Please check all that apply (use attached Instruct Plat (fill out/PRINT Questionnaire Form, Plat	street name / side/corner for all applications) ctions for this form). Checklist) Site Plan Checklist)	street				
Type of Application (this form required Please check all that apply (use attached Instruc ☑ Plat (fill out/PRINT Questionnaire Form, Plat ☐ Site Plan (fill out/PRINT Questionnaire Form,	street name / side/corner for all applications) ctions for this form). Checklist) Site Plan Checklist) ire Form, Note Amendment Checklist	street	name			
Type of Application (this form required Please check all that apply (use attached Instruc ☑ Plat (fill out/PRINT Questionnaire Form, Plat ☐ Site Plan (fill out/PRINT Questionnaire Form, ☐ Note Amendment (fill out/PRINT Questionnaire	street name / side/corner for all applications) ctions for this form). Checklist) Site Plan Checklist) ire Form, Note Amendment Checon Form, Vacation Checklist, use	street	name			
Type of Application (this form required Please check all that apply (use attached Instruct ☑ Plat (fill out/PRINT Questionnaire Form, Platt ☐ Site Plan (fill out/PRINT Questionnaire Form, ☐ Note Amendment (fill out/PRINT Questionnaire ☐ Vacation (fill out/PRINT Vacation Continuation ☐ Vacating Plats, or any Port	street name / side/corner for all applications) ctions for this form). Checklist) Site Plan Checklist) ire Form, Note Amendment Checon Form, Vacation Checklist, use	cklist) Vacation Instructi	ons)			
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Application Status						
Has this project been previously submitted?	□ Yes	⊠ No		□ Don'	t Know	
This is a resubmittal of: ☐ Entire Project	☐ Portion of Project		⊠ N/A	1		
What was the project number assigned by the Planning and Development Division?	Project Number		⊠ N/A	□ Don'	t Know	
Project Name			⊠ N/A	□ Don'	t Know	
Are the boundaries of the project exactly the same as the previously submitted project?	□ Yes	□ No		□ Don'	t Know	
Has the flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?	□ Yes	□No		□ Don't Know		
If yes, consult Policy 13.01.10 of the Land Use	Plan. A compa	tibility determina	tion may be	required		
Replat Status			,			
Is this plat a replat of a plat approved and/or recorded	l after March 2	0. 1979? 🗆 Y e	es 🖾 No	□ Don	't Know	
If YES, please answ		in that the organist and reconstruction with the contra				
Project Name of underlying approved and/or recorded plat			t Number			
Is the underlying plat all or partially residential?		□ Ye	es 🗆 No	□ Don	't Know	
If YES, please answ	er the following	questions.	Andrew A			
Number and type of units approved in the underlying plat.						
Number and type of units proposed to be deleted by this replat.						
Difference between the total number of units being deleted from the underlying	ng plat and the numb	er of units proposed in	this replat.			
School Concurrency (Residential Plats, Re	plats and Sit	e Plan Subm	issions)			
Does this application contain any residential units? (If	"No," skip the	remaining quest	ions.)	⊠ Yes	□ No	
If the application is a replat, is the type, number, or be changing?	edroom restrict	on of the reside	ntial units	□ Yes	□ No	
If the application is a replat, are there any new or ad the replat's note restriction?	ditional reside	ntial units being	added to	□ Yes	□ No	
Is this application subject to an approved Declaratio Agreement entered into with the Broward County Scho		e Covenants or	Tri-Party	□ Yes	⊠ No	
If the answer is "Yes" to RESIDENTIAL APPLICATIONS ONLY: Provide a receipt Impact Application (PSIA) and fee have been accepted concurrency, exempt from school concurrency (exemptions communities, and projects contained within Developments Restrictive Covenant or Tri-Party Agreement.	ot from the School d by the School include projects	nool Board docu I Board for resid that generate less	ential project than one stu	s subject ident, age	to school restricted	

Land Use and Zoning	
EXISTING	PROPOSED
Land Use Plan Designation(s)	Land Use Plan Designation(s)
Industrial and Low-Medium (10) Residential	Medium (16) Residential
Zoning District(s)	Zoning District(s)
IM-3 and RS-3	PUD

Existing Land Use

A credit against impact fees may be given for the site's current or previous use. No credit will be granted for any demolition occurring more than eighteen (18) months and/or sixty (60) months for mobile homes of Environmental Review of construction plans. To receive a credit, complete the following table. Note: If buildings have been demolished, which are not shown on the survey required with this application, attach an additional "as built" survey dated within eighteen (18) months of this application. Other evidence may be accepted if it clearly documents the use, gross square footage and/or number and type of dwelling units, and date of demolition.

Are there any existing structures on the site?

			EXISTING STUCTURE(S)			
Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	Remain the Same?	Change Use?	Has been or will be Demolished?	
			YES NO	YES NO	HAS WILL NO	
			YES NO	YES NO	HAS WILL NO	
			YES NO	YES NO	HAS WILL NO	

*Gross non-residential square footage includes permanent canopies and overhangs for gas stations, drive-thru facilities, and overhangs designed for outdoor tables at a restaurant. A building id defined by the definition in the Land Development Code.

Proposed Use				
RESIDEN	TIAL USES	NON-RESIDENTIAL USES		
Land Use	Number of Units/Rooms	Land Use	Net Acreage or Gross Floor Area	
Garden Apartments	420			

NOTARY PUBLIC: Owner/Agent Certification					
This is to certify that I am the owner/agent of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge. By signing this application, owner/agent specifically agrees to allow access to described property at reasonable times by County personnel for the purpose of verification of information provided by owner/agent.					
Gigtro-Kt" 11-18-20					
Owner/Agent Signature Date					
NOTARY PUBLIC					
STATE OF FLORIDA COUNTY OF BROWARD					
The foregoing instrument was acknowledged before me by means of physical presence online notarization, this					
as identification. Name of Notary Typed, Printed or Stamped IDA JANE STORMS MY COMMISSION # GG 276312 EXPIRES: December 20, 2022 Bonded Thru Notary Public Underwriters Name of Notary Public Underwriters					
Notary Seal (or Title or Rank) Serial Number (if applicable)					
Notary Seal (or Title or Rank) Serial Number (if applicable)					
Notary Seal (or Title or Rank) Serial Number (if applicable) For Office Use Only					
For Office Use Only Application Type MUNI PLOT					
For Office Use Only Application Type					
For Office Use Only Application Type MUNI PLOT Acceptance Date Acceptance Date					
For Office Use Only Application Type MUNI PLOT Acceptance Date 12120 Fee \$4,180					
For Office Use Only Application Type MUNI PLOT Application Date $ 1 23 20$ Comments Due $ 2 22 20$ Acceptance Date $ 2 2 2 20$ Report Due Acceptance Date $ 2 2 2 20$ Report Due Acceptance Date $ 2 2 2 20$ Report Due Acceptance Date $ 2 2 2 20$ Adjacent City or Cities					
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For Office Use Only Application Type MUNI PLOT Application Date U 23 20 Comments Due 12 22 20 Report Due Acceptance Date 12 1 20 CC Meeting Date NA Adjacent City or Cities DANIA BEAGL Plats Surveys Site Plans Landscaping Plans Lighting Plans					
For Office Use Only Application Type MUNI PLOT Application Date U 23 20 Report Due 12 2 2 2 2 2 2 2 2 Adjacent City or Cities Plats Surveys Site Plans Landscaping Plans Lighting Plans CIA Received: SCANSON & SONON MACKINET.					
For Office Use Only Application Type MUNI PLOT Application Date U 23 20 Comments Due 12 22 20 Report Due 12 21 Adjacent City or Cities DANIA BEAGL Plats Surveys Site Plans Landscaping Plans Lighting Plans City Letter Agreements Other: Distribute To					
For Office Use Only Application Type MUNI PLOT Application Date U 23/20 Report Due I 2 2 2 2 CC Meeting Date I 2 2 2 2 CC Meeting Date Adjacent City or Cities DANIA BETOD W Plats Surveys Site Plans Landscaping Plans Lighting Plans City Letter Agreements Other: CIM RECEIVE; SOMEON LOWN RECEIVET. Distribute To Fee \$ 4,180 CC Meeting Date N/A Lighting Plans Lighting Plans Lighting Plans City Letter School Board Land Use & Permitting					



Application Number $000-M\gamma-20$

Development and Environmental Review Online Application Questionnaire Form

Ty	/pe	of Application					
	5	☑ Plat □	Site Plan		□ Note Amen	dment	
Pı	oje	ct Questionnaire					
Ple	ease	answer the questions marked for the type	of application chec	ked.			
X	1. Why is this property being platted? Attach an additional sheet(s) if necessary.						
	Property is not a lot of record and platting is required for development.						
×	 Is this project within an existing Development of Regional Impact (DRI) or Florida Quality Development (FQD)? If "Yes", indicate DRI or FQD name and Latest Ordinance number or Official Record Book and Page Number. 					□ Yes	⊠ No
	DF	RI Name	FQD N	ame	7		
-	La	atest Ordinance Number	Official	Record Book and Page	Number		
×	3.	Is the project subject to any existing or a municipality? If "Yes", state the title copy(s).				□ Yes	⊠ No
	4.	Is any portion of this plat currently the s	ubject of a Land Us	se Plan Amendm	ent (LUPA)?	⊠ Yes	□ No
	lf \	YES, LUPA Number PO-2020-12 (City of Hollywood)					
	5.	Does the note represent a change in TF	RIPS?	☑ Increase	□ Decrease	□ No	Change
	6.	Does the note represent a major change	e in Land Use?			□ Yes	⊠ No
×	7.	Are any off-site roadway improvements proposed by the applicant? If "Yes", atta			nt agency or	□ Yes	⊠ No
X	8.	Does this property or project have an adj attach the appropriate documentation.	udicated or vested	rights status? If "	Yes", please	□ Yes	⊠ No
X	9.	Does the owner have any financial interest if "Yes", please attach a sheet(s) and de		ar or adjacent to	this project?	□ Yes	⊠ No
×	10.	Does this property abut a State Road Requirement No. 19 for required lette (FDOT).				⊠ Yes	□ No

X	11. Has consideration been given to public transportation routes, shelters, or turnouts for the proposed project? If "Yes", please attach sheet(s) and describe fully.	□ Yes	⊠ No
X	12. Are bikeways and walkways to be provided to connect residential areas to school or recreational sites? If "Yes", attach five (5) drawings showing facilities (if not show on plat).	□ Yes	⊠ No
×	13. Is credit being requested for private recreational facilities? If "Yes", attach two (2) sets of plans showing facilities. (APPLIES TO PROJECTS IN THE UNINCORPORATED AREA ONLY.)	□ Yes	⊠ No
X	14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted.	□ Yes	⊠ No
	Name/Title		
X	15. If a school site will be reserved or dedicated on the property, is the site delineated on the plat or site plan?	□ Yes	⊠ No
×	16. Are there any natural features located on the property (e.g. wetlands, dunes, areas of native tree canopy wildlife, habitats, etc.)? If "Yes", attach a sheet(s) and describe fully. For information, contact Aquatic and Wetland Resources Section, Environ. Licensing & Bldg. Permitting (ELBP) Division.	□ Yes	⊠ No
×	17. Does the property contain any portion of lands identified as "Natural Resource Areas?" If "Yes" see Supplemental Documentation Requirement No. 8. For locations, contact Aquatic and Wetland Resources Section (ELBP Division).	□ Yes	⊠ No
×	18. Does the property contain any portion of lands identified as an "Urban Wilderness Area" or "Vegetative Resource Category Local Area of Particular Concern?" If "Yes", please see Supplemental Documentation Requirement No. 9. For locations, contact Aquatic and Wetland Resources Section (ELBP Division).	□ Yes	⊠ No
×	19. Does the property contain any portion of lands identified as a "Cultural Resource Category Local Area of Particular Concern" which include archaeological sites and/or historic sites and structures? If "Yes", for archaeological sites, see Supplemental Documentation Requirement No. 10. For historic locations, contact the Broward County Historic Preservation Officer.	□ Yes	⊠ No
×	20. Will any dredging or major filling operation be necessary, or is a waterway involved in the proposed project? If "Yes", permits may be required from Broward County. Please contact Broward County Aquatic and Wetland Resources Section (ELBP Division).	□ Yes	⊠ No
X	21. Is the project to be served by an approved potable water system? If "Yes", state the name of facility and facility address.	⊠ Yes	□ No
	Facility Name Hollywood Water Treatment Plant		
	Address 3441 Hollywood Boulevard		
X	22. Is this project to utilize on-site wells for its potable water? If "Yes", see Supplemental Documentation Requirement No. 13 for required letter.	□ Yes	⊠ No
\times	23. Is this project to be served by an approved wastewater (sewage) treatment plant? If "Yes", state the name of facility and facility address.	⊠ Yes	□ No
	Facility Name Hollywood Water Treatment Plant		
	Address 3441 Hollywood Boulevard		

X	24. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter.	□ Yes	⊠ No
×	25. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector.	□ Yes	⊠ No
	Solid Waste Collector		
X	26. Has any contact been made with FPL and AT&T regarding service availability and easement requirements? If "Yes", state name and title of the person contacted.	□ Yes	⊠ No
	FPL – Name/Title		
	AT&T – Name/Title		
X	27. Estimate or state the total number of on-site parking spaces to be provided.	Spaces	
	27. Estimate of state the total number of on site parking spaces to be provided.	TBD	
×	28. If applicable, state the seating capacity of any proposed restaurant or public assembly facility, including day care centers or schools, or places of worship.	Seating N/A	