



Application Number 021-MP-03

Environmental Protection and Growth Management Department
PLANNING AND DEVELOPMENT MANAGEMENT DIVISION
 1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-6666 F: 954-357-6521 · Broward.org/Planning

Development and Environmental Review Online Application

Project Information			
Plat/Site Plan Name Sheridan House No. 3			
Plat/Site Number 021-MP-03	Plat Book - Page (if recorded) Book 174 Page 42		
Owner/Applicant/Petitioner Name Sheridan House, Inc.			
Address 1700 S. Flamingo Rd.	City Davie	State FL	Zip 33325
Phone	Email		
Agent for Owner/Applicant/Petitioner Dunay, Miskel & Backman, LLP		Contact Person Hope Calhoun, Esq.	
Address 14 SE 4th St. Suite 36	City Boca Raton	State FL	Zip 33432
Phone 561-405-3324	Email hcalhoun@dmbblaw.com		
Folio(s) 504013140010			
Location <div style="display: flex; justify-content: space-between; align-items: flex-start;"> east side of <u>S. Flamingo Rd.</u> at/between/and <u>SW 14th St.</u> and/of <u>SW 20th St.</u> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; font-size: small; margin-top: 5px;"> <i>north side/corner north</i> <i>street name</i> <i>street name / side/corner</i> <i>street name</i> </div>			

Type of Application (this form required for all applications)
Please check all that apply (use attached Instructions for this form).
<input type="checkbox"/> Plat (fill out/PRINT <i>Questionnaire Form, Plat Checklist</i>)
<input type="checkbox"/> Site Plan (fill out/PRINT <i>Questionnaire Form, Site Plan Checklist</i>)
<input checked="" type="checkbox"/> Note Amendment (fill out/PRINT <i>Questionnaire Form, Note Amendment Checklist</i>)
<input type="checkbox"/> Vacation (fill out/PRINT <i>Vacation Continuation Form, Vacation Checklist, use Vacation Instructions</i>)
<input type="checkbox"/> Vacating Plats, or any Portion Thereof (BCCO 5-205)
<input type="checkbox"/> Abandoning Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 27.29)
<input type="checkbox"/> Releasing Public Easements and Private Platted Easements or Interests (BCAC 27.30)
<input type="checkbox"/> Vacation (<i>Notary Continuation Form Affidavit</i> required, fill out <u>Business Notary</u> if needed)

Application Status			
Has this project been previously submitted?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
This is a resubmittal of:	<input type="checkbox"/> Entire Project	<input checked="" type="checkbox"/> Portion of Project	<input type="checkbox"/> N/A
What was the project number assigned by the Planning and Development Division?	Project Number	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Don't Know
Project Name		<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Don't Know
Are the boundaries of the project exactly the same as the previously submitted project?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
Has the flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Don't Know
If yes, consult Policy 13.01.10 of the Land Use Plan. A compatibility determination may be required.			

Replat Status	
Is this plat a replat of a plat approved and/or recorded after March 20, 1979?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Don't Know
If YES, please answer the following questions.	
Project Name of underlying approved and/or recorded plat	Project Number
Is the underlying plat all or partially residential?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know
If YES, please answer the following questions.	
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 plat and the number of units proposed in this replat.	

School Concurrency (Residential Plats, Replats and Site Plan Submissions)	
Does this application contain any residential units? (If "No," skip the remaining questions.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the application is a replat, is the type, number, or bedroom restriction of the residential units changing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the application is a replat, are there any new or additional residential units being added to the replat's note restriction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this application subject to an approved Declaration of Restrictive Covenants or Tri-Party Agreement entered into with the Broward County School Board?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If the answer is "Yes" to any of the questions above	
RESIDENTIAL APPLICATIONS ONLY: Provide a receipt from the School Board documenting that a Public School Impact Application (PSIA) and fee have been accepted by the School Board for residential projects subject to school concurrency, exempt from school concurrency (exemptions include projects that generate less than one student, age restricted communities, and projects contained within Developments of Regional Impact), or subject to an approved Declaration of Restrictive Covenant or Tri-Party Agreement.	

Land Use and Zoning	
EXISTING	PROPOSED
Land Use Plan Designation(s) Residential 1 DU/Acre	Land Use Plan Designation(s) Residential 1 DU/Acre
Zoning District(s) Community Facilities (CF)	Zoning District(s) Community Facilities (CF)

Existing Land Use					
<p>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 three (3) years 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 three (3) years 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.</p>					
<p>Are there any existing structures on the site? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>					
Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	EXISTING STRUCTURE(S)		
			Remain the Same?	Change Use?	Has been or will be Demolished?
3 Special Residential Facility Buildings (9 DU Equivalent), 2 SF homes 1 duplex, 3 villas (3 units in each villa)	22 DU's		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	YES <input type="checkbox"/> NO	HAS WILL <input type="checkbox"/> NO
Administrative Building	15,000		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	YES <input type="checkbox"/> NO	HAS WILL <input type="checkbox"/> NO
Maintenance Facility	8,000		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	YES <input type="checkbox"/> NO	HAS WILL <input type="checkbox"/> NO
<p>*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.</p>					

Proposed Use			
RESIDENTIAL USES		NON-RESIDENTIAL USES	
Land Use	Number of Units/Rooms	Land Use	Net Acreage or Gross Floor Area
Special Residential Facility Buildings	8 units with 48 sleeping rooms/24 DU's	Administrative Building	15,000 sq. ft.
duplex buildings	6 units/12 DU's	Maintenance Facility	8,000 sq. ft.
Villas	4 buildings with 3 units/12 DU's		
Single-family homes	2 homes/2 DU's		

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.

[Signature] _____ Date 2/22/2022

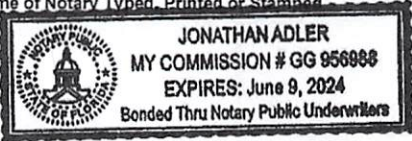
Owner/Agent Signature _____ Date

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of physical presence | online notarization, this 22 day of February, 2022, who is personally known to me | has produced _____ as identification.

Jonathan Adler _____
Name of Notary Typed, Printed or Stamped Signature of Notary Public – State of Florida



Notary Seal (or Title or Rank) _____ Serial Number (if applicable) _____

For Office Use Only

Application Type
NOTE Amendment Application.

Application Date <u>2/22/2022</u>	Acceptance Date <u>6/29/2022</u>	Fee <u>\$ 2090.00</u>
Comments Due <u>7/19/2022</u>	Report Due <u>TBP</u>	CC Meeting Date <u>TBD.</u>

Adjacent City or Cities
N/A

Plats
 Surveys
 Site Plans
 Landscaping Plans
 Lighting Plans
 City Letter
 Agreements

Other:

Distribute To

<input checked="" type="checkbox"/> Full Review	<input type="checkbox"/> Planning Council	<input type="checkbox"/> School Board	<input type="checkbox"/> Land Use & Permitting
<input type="checkbox"/> Health Department	<input type="checkbox"/> Zoning Code Services (BMSD only)	<input type="checkbox"/> Administrative Review	

Other:

Received By Diego Pandoza.



Application Number 021-MP-03

Development and Environmental Review Online Application Questionnaire Form

Type of Application		
<input type="checkbox"/> Plat	<input type="checkbox"/> Site Plan	<input checked="" type="checkbox"/> Note Amendment

Project Questionnaire

Please answer the questions marked for the type of application checked.

	1. Why is this property being platted? Attach an additional sheet(s) if necessary.				
2. 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">DRI Name</td> <td style="width: 50%; padding: 2px;">FQD Name</td> </tr> <tr> <td style="padding: 2px;">Latest Ordinance Number</td> <td style="padding: 2px;">Official Record Book and Page Number</td> </tr> </table>	DRI Name	FQD Name	Latest Ordinance Number	Official Record Book and Page Number
DRI Name	FQD Name				
Latest Ordinance Number	Official Record Book and Page Number				
3. Is the project subject to any existing or proposed agreement(s) with Broward County or a municipality? If "Yes", state the title and subject of the agreement(s) and attach a copy(s). <input type="checkbox"/> Yes <input type="checkbox"/> No					
4. Is any portion of this plat currently the subject of a Land Use Plan Amendment (LUPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">If YES, LUPA Number</td> </tr> </table>	If YES, LUPA Number			
If YES, LUPA Number					
5. Does the note represent a change in TRIPS? <input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input checked="" type="checkbox"/> No Change					
6. Does the note represent a major change in Land Use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
7. Are any off-site roadway improvements being required by any government agency or proposed by the applicant? If "Yes", attach any sheets and describe fully. <input type="checkbox"/> Yes <input type="checkbox"/> No					
8. Does this property or project have an adjudicated or vested rights status? If "Yes", please attach the appropriate documentation. <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. Does the owner have any financial interest in properties near or adjacent to this project? If "Yes", please attach a sheet(s) and describe fully. <input type="checkbox"/> Yes <input type="checkbox"/> No					
10. Does this property abut a State Road? If "Yes", see Supplemental Documentation Requirement No. 19 for required letter from Florida Department of Transportation (FDOT). <input type="checkbox"/> Yes <input type="checkbox"/> No					

	<p>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.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Name/Title</p>	
	<p>15. If a school site will be reserved or dedicated on the property, is the site delineated on the plat or site plan?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>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).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>21. Is the project to be served by an approved potable water system? If "Yes", state the name of facility and facility address.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Facility Name City of Sunrise-Sawgrass Water Treatment Plant</p>	
	<p>Address 14150 NW 8th St. Sunrise, FL 33325</p>	
	<p>22. Is this project to utilize on-site wells for its potable water? If "Yes", see Supplemental Documentation Requirement No. 13 for required letter.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>23. Is this project to be served by an approved wastewater (sewage) treatment plant? If "Yes", state the name of facility and facility address.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Facility Name System II Wastewater Treatment Plant</p>	
	<p>Address 7351 SW 30th St. Davie, FL 33314</p>	

	24. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	25. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<table border="1" style="width: 100%;"> <tr> <td data-bbox="219 321 1507 394">Solid Waste Collector</td> </tr> </table>		Solid Waste Collector	
Solid Waste Collector				
	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.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<table border="1" style="width: 100%;"> <tr> <td data-bbox="219 491 1507 554">FPL – Name/Title</td> </tr> <tr> <td data-bbox="219 554 1507 617">AT&T – Name/Title</td> </tr> </table>		FPL – Name/Title	AT&T – Name/Title
FPL – Name/Title				
AT&T – Name/Title				
	27. Estimate or state the total number of on-site parking spaces to be provided.	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">Spaces</td> </tr> <tr> <td style="text-align: center;">298</td> </tr> </table>	Spaces	298
Spaces				
298				
	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.	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">Seating</td> </tr> <tr> <td style="text-align: center;">N/A</td> </tr> </table>	Seating	N/A
Seating				
N/A				



Gary Dunay
Bonnie Miskel
Scott Backman
Eric Coffman

Hope Calhoun
Dwayne Dickerson
Ele Zachariades
Matthew H. Scott

Christina Bilenki
Lauren G. Odom
Nicole Jaeger
Rachael Bond Palmer

Josie P. Sesodia, AICP
Resilient Environment Department Director
Urban Planning Division
115 S. Andrews Ave. Room 329K
Fort Lauderdale, FL 33301

RE: Note Amendment on the Sheridan House No. 3 Plat

Dear Ms. Sesodia,

Sheridan House, Inc. (“Applicant”) is the owner of a +/- 57 acre parcel generally located on the east side of South Flamingo Road, between SW 14th Street and SW 20th Street and addressed at 1700 South Flamingo Road in the Town of Davie (“Property”). The Property is located on Parcel A of the Sheridan House No. 3 plat. The Property has a future land use designation of Residential 1 du/ acre with a zoning designation of Community Facility (CF).

Sheridan House is a multifaceted ministry dedicated to helping families. According to the Sheridan House website, “[f]or over 50 years, Sheridan House Family Ministries has provided residential care for children in the tri-county area of South Florida. We offer assistance to families with middle-school-aged children (grades 6-8) and high-school-aged children (grades 9-10) experiencing behavioral issues which may include: school suspensions, difficulties in or academic failure, disruptive family behavior, immaturity, acting out behaviors, poor impulse control, defiant and disrespectful behavior, procrastination and motivational problems.

The Sheridan House Residential Program is designed to intervene in the life of a family before dysfunctional behavior becomes a habitual lifestyle. Our chief objective is to provide the structure and environment that allows the child to make the life changes necessary to accept responsibility for their behavior at home and school and develop essential life skills. It is also our desire to equip and educate the parents of our children so the child can graduate and re-enter the home successfully.”

The Applicant previously received site plan approval to develop the Property with 8 special residential facility units (16 dwelling unit equivalents), 2 single-family units, 35 villas, 5,000 square feet of day care use and 38,000 square feet of administrative/accessory uses. The Applicant is proposing to modify the unit types to reduce the number of villas (buildings with 3 or more attached units) from 35 to 4 and construct 6 duplexes (buildings with 2 attached units) and remove the day care and counseling center buildings. In order to develop the Project on the Property, the Applicant is requesting to amend the note on the face of the plat as follows:

FROM:

“This Plat is restricted to 8 special residential facility Category (2) units, as defined by the Broward County Land Use Plan (16 dwelling unit equivalents) 2 three-bedroom accessory single family detached units, 35 villas, 5,000 square feet day care and 38,000 square feet administrative/accessory uses. The day care is restricted to children residing in the on-site dwelling units.”

TO:

“This Plat is restricted to 8 special residential facility Category (2) units, as defined by the Broward County Land Use Plan (48 sleeping rooms, 16 dwelling unit equivalents), 2 three-bedroom accessory single family detached units, 6 duplexes, 4 villas and 38,000 square feet administrative/accessory uses.

Thank you in advance for your consideration of this request. Please contact the undersigned should you have any questions.

Sincerely,

Dunay, Miskel & Backman, LLP



Hope Calhoun, Esq.