

Application Number 020-MP-04

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

<b>Project Information</b>			
Plat/Site Plan Name <b>BLESSED JOHN XXIII PLAT</b>			
Plat/Site Number <b>020-MP-04</b>		Plat Book - Page (if recorded) <b>P.B. 177, PGS. 99 &amp; 100 (BROWARD)</b>	
Owner/Applicant/Petitioner Name THE MOST REVEREND THOMAS G. WENSKI AS ARCHBISHOP OF THE ARCHDIOCESE OF MIAMI, HIS SUCCESSORS IN OFFICE, A CORPORATION SOLE			
Address <b>9401 BISCAYNE BOULEVARD</b>		City <b>MIAMI SHORES</b>	State <b>FL</b>
Phone <b>305-762-1063</b>		Email <b>sad@jpfitzlaw.com</b>	
Agent for Owner/Applicant/Petitioner <b>SCHWEBKE-SHISKIN &amp; ASSOCIATES, INC.</b>		Contact Person <b>RONALD A. FRITZ, ASSISTANT VICE PRESIDENT</b>	
Address <b>3240 CORPORATE WAY</b>		City <b>MIRAMAR</b>	State <b>FL</b>
Phone <b>(O)954-435-7010 (C)954-288-4474</b>		Email <b>rfritz@shiskin.com</b>	
Folio(s) <b>5140-29-16-0010</b>			
Location <b>SOUTH SIDE</b> side of <b>MIRAMAR PARKWAY</b> at/between/and <b>BETWEEN S.W. 160th AVENUE</b> and/of <b>AND S.W. 172nd AVENUE</b> <small>north side/corner north street name street name / side/corner street name</small>			

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

<b>Application Status</b>			
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 020-MP-04	<input type="checkbox"/> N/A	<input type="checkbox"/> Don't Know
Project Name CASA SANT'ANGELO		<input type="checkbox"/> N/A	<input 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 type="checkbox"/> No	<input checked="" type="checkbox"/> Don't Know
<b>If yes, consult Policy 13.01.10 of the Land Use Plan. A compatibility determination may be required.</b>			

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

<b>School Concurrency (Residential Plats, Replats and Site Plan Submissions)</b>	
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 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 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
<b>If the answer is "Yes" to any of the questions above</b>	
<b>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.</b>	

Land Use and Zoning	
EXISTING	PROPOSED
Land Use Plan Designation(s) <b>LOW (3) RESIDENTIAL</b>	Land Use Plan Designation(s) <b>LOW (3) RESIDENTIAL</b>
Zoning District(s) <b>COMMUNITY FACILITIES</b>	Zoning District(s) <b>COMMUNITY FACILITIES</b>

**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?  Yes  No

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?
CHURCH	SEE ATTACHED	N/A	<input checked="" type="radio"/> YES NO	YES <input checked="" type="radio"/> NO	HAS   WILL <input checked="" type="radio"/> NO
ANCILLARY BUILDINGS	EXHIBIT "A"	N/A	<input checked="" type="radio"/> YES NO	YES <input checked="" type="radio"/> NO	HAS   WILL <input checked="" type="radio"/> 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**

RESIDENTIAL USES		NON-RESIDENTIAL USES	
Land Use	Number of Units/Rooms	Land Use	Net Acreage or Gross Floor Area
COMMUNITY FACILITIES	114 UNITS	N/A	N/A

**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.

(K) Sister Elizabeth Morley \_\_\_\_\_ Date Sept 4, 2020  
Owner/Agent Signature

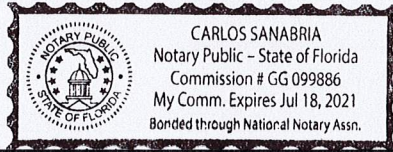
**NOTARY PUBLIC**

**STATE OF FLORIDA  
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of  physical presence |  online notarization, this 4 day of SEPTEMBER, 2020, who  is personally known to me |  has produced \_\_\_\_\_ as identification.

CARLOS SANABRIA  
Name of Notary Typed, Printed or Stamped

[Signature]  
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 Date <u>03/17/2021</u>	Acceptance Date <u>03/19/2021</u>	Fee <u>\$ 2,090</u>
Comments Due <u>04/08/2021</u>	Report Due <u>04/19/2021</u>	CC Meeting Date <u>TBD</u>

Adjacent City or Cities

- Plats     
  Surveys     
  Site Plans     
  Landscaping Plans     
  Lighting Plans  
 City Letter     
  Agreements

Other: SCAD Letter

- Distribute To
- Full Review     
  Planning Council     
  School Board     
  Land Use & Permitting  
 Health Department     
  Zoning Code Services (BMSD only)     
  Administrative Review

Other:

Received By

[Signature]



Application Number 020-MP-04

## 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					
<b>Please answer the questions marked for the type of application checked.</b>					
	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. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
	<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). <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
<b>X</b>	4. Is any portion of this plat currently the subject of a Land Use Plan Amendment (LUPA)? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
	<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					
<b>X</b>	5. Does the note represent a change in TRIPS? <span style="float: right;"><input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> No Change</span>				
<b>X</b>	6. Does the note represent a major change in Land Use? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
	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. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
	8. Does this property or project have an adjudicated or vested rights status? If "Yes", please attach the appropriate documentation. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
	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. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				
	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). <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>				

	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.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	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).	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Name/Title		
	15. If a school site will be reserved or dedicated on the property, is the site delineated on the plat or site plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.	<input type="checkbox"/> Yes	<input type="checkbox"/> 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).	<input type="checkbox"/> Yes	<input type="checkbox"/> 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).	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.	<input type="checkbox"/> Yes	<input type="checkbox"/> 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).	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Facility Name		
	CITY OF MIRAMAR		
	Address		
	MIRAMAR WEST WTP - 4100 FLAMIGO ROAD		
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.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
X	23. Is this project to be served by an approved wastewater (sewage) treatment plant? If "Yes", state the name of facility and facility address.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Facility Name		
	CITY OF MIRAMAR		
	Address		
	MIRAMAR WEST WWP - 13900 PEMBROKE ROAD		

X	24. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter. <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>
	25. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Solid Waste Collector</div>
	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. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FPL – Name/Title</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">AT&amp;T – Name/Title</div>
X	27. Estimate or state the total number of on-site parking spaces to be provided. <span style="float: right;">Spaces <b>118</b></span>
X	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. <span style="float: right;">Seating <b>N/A</b></span>



April 5, 2021

Karina Da Luz, Planning Section Supervisor  
Environmental Protection and Growth Management Department  
**PLANNING AND DEVELOPMENT MANAGEMENT DIVISION**  
1 North University Dr. Suite 102A  
Plantation, FL 33324

**Re:** Delegation Request for BLESSED JOHN XXIII - Plat Book 177, Pages 99 & 100  
Broward County Reference Number: 020-MP-04

Dear Karina,

Due to the rethinking of the previous development plan of this site it has become necessary to submit a Plat Note Amendment Delegation Request. The Development and Environmental Review Application being submitted is requesting the revision of the existing Plat Note, as shown on the herein referenced plat of "Blessed John XXIII Plat", to allow the addition of a Special Residential Facility Category 3 (d) consisting of 114 sleeping rooms (57 dwelling units equivalent). The school allocation will remain divided into the following categories: (1)9,901 square feet of pre-K; (2)27,273 square feet of elementary school; and (3)13,636 square feet of middle school. Please see below for the existing Plat Note language to be replaced and the proposed Plat Note language.

**Existing Plat Note:**

This plat is restricted to 59,840 square feet of church; 50,810 square feet of private school (9,901 square feet of pre-K; 27,273 square feet of elementary school, and 13,636 square feet of middle school); and 75 senior garden apartments.

**Proposed Plat Note:**

This plat is restricted to 59,840 square feet of Church; 50,810 square feet of Private School; and a Special Residential Facility Category 3(d) consisting of 114 sleeping rooms (57 dwelling units equivalent).

If you should have any questions or require additional information, please do not hesitate to contact me at 954-288-4474 or [rfritz@shiskin.com](mailto:rfritz@shiskin.com).

Regards,

*Schwebke-Shiskin & Associates, Inc.*

A handwritten signature in blue ink that reads "Ronald A. Fritz".

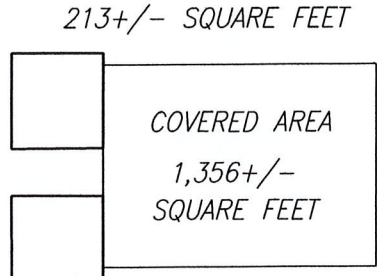
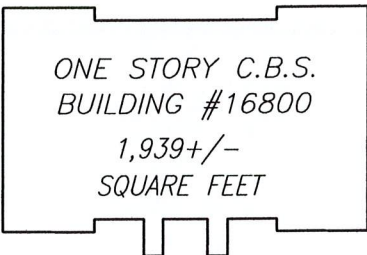
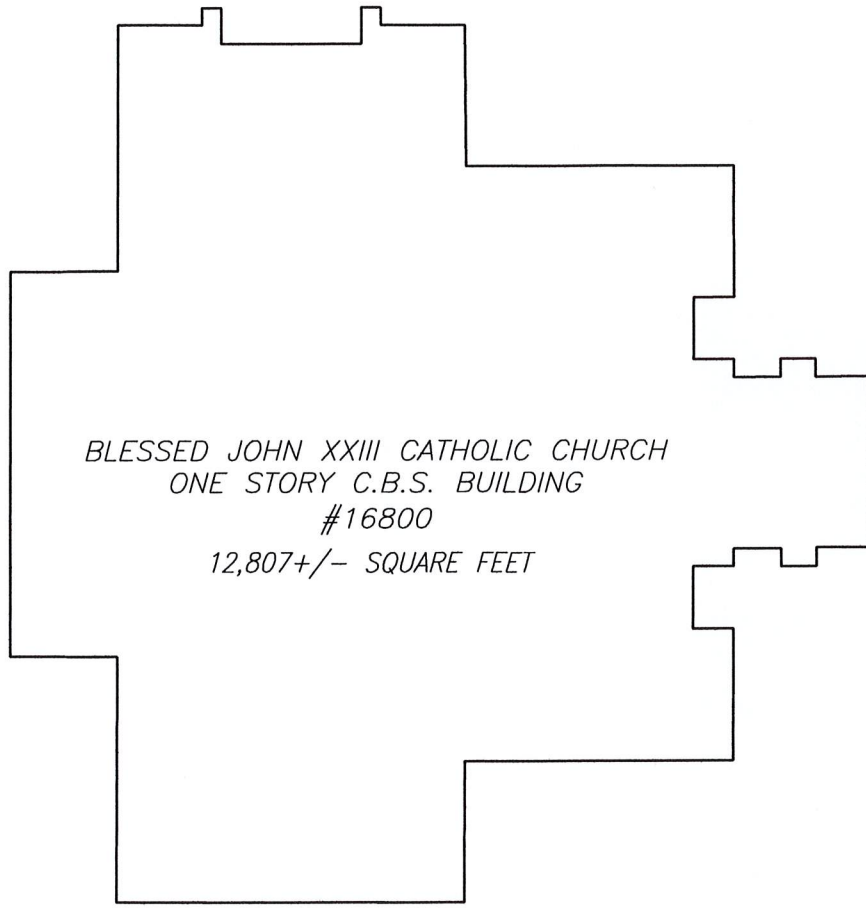
Ronald A. Fritz, P.L.S.  
Assistant Vice President

RAF/vf



# SKETCH TO ACCOMPANY

## PLAT OF "BLESSED JOHN XXIII" PLAT NOTE AMENDMENT P.B. 177, PGS. 99 & 100, BROWARD COUNTY, FLORIDA (BROWARD COUNTY PROJECT No. 020-MP-04)



186+/- SQUARE FEET

I HEREBY CERTIFY THAT: THE INFORMATION AS SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS RECENTLY SURVEYED AND DRAWN UNDER MY SUPERVISION AND DIRECTION.

Schwebke-Shiskin & Associates, Inc.

By: Ronald A. Fritz DATE: 03/02/2021  
 RONALD A. FRITZ, ASSISTANT VICE PRESIDENT  
 PROFESSIONAL LAND SURVEYOR No. 2767  
 STATE OF FLORIDA

EXHIBIT "A"  
SHEET 1 OF 1 SHEETS



### SCHWEBKE-SHISKIN & ASSOCIATES, INC.

LAND SURVEYORS-ENGINEERS-LAND PLANNERS - 3240 CORPORATE WAY-MIRAMAR, FL 33025

PHONE No.(954)435-7010

FAX No. (954)438-3288

ORDER NO. 204171

DATE: MAY 20, 2015

THIS IS NOT A "BOUNDARY SURVEY"

CERTIFICATE OF AUTHORIZATION No. LB-87

#### REVISIONS
