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Application Number <u>OI9-MP-2</u>0

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					
Owner/Applicant/Petitioner Name	1 N N N N N N		1		
CC HOMES, LLC					
Address		City	State	Zip	
5650, 5700, AND 5800 SW 106 AV	E	COOPER CITY	FL	33328	
Phone	Email				
(786) 453-3013	JWRIGHT@	CCHOMES.COM	1		
Agent for Owner/Applicant/Petitioner		Contact Person		* 10 × 10 × 20	
CRAVEN THOMPSON & ASSOCIA	TES, INC.	JULIAN BOBILEV			
Address		City	State	Zip	
3563 NW 53RD STREET FORT LAUDERDALE FL				33309	
Phone	Phone Email				
(954) 739-6400 X379 JBOBILEV@CRAVENTHOMPSON.COM					
Plat/Site Plan Name					
KINGFISHER RESERVE					
Plat/Site Number		Plat Book - Page (if recorded)			
		N/A			
Folio(s)					
504131010760, 504131010761, 504	131010780	 Cooper City 			
Location	1		10.000		
north of side of Stirling Road at	Cher	ry Road/SW 106th Avenue and/of SV	N 103rd 4	Ave	
north side/corner north side/corner north		street name / side/corner	street n		

Type of Application (this form required for all applications)

Please check all that apply (use attached Instructions for this form).

Plat (fill out/PRINT Questionnaire Form, Plat Checklist)

Site Plan (fill out/PRINT Questionnaire Form, Site Plan Checklist)

□ Note Amendment (fill out/PRINT Questionnaire Form, Note Amendment Checklist)

□ Vacation (fill out/PRINT Vacation Continuation Form, Vacation Checklist, use Vacation Instructions)

□ Vacating Plats, or any Portion Thereof (BCCO 5-205)

□ Abandoning Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 27.29)

□ Releasing Public Easements and Private Platted Easements or Interests (BCAC 27.30)

□ Vacation (Notary Continuation Form Affidavit required, fill out Business Notary if needed)



Has this project been previously submitted?	□ Yes	🖾 No		Don't Know
This is a resubmittal of: DEntire Project	□ Portion of	Project	🖾 N/A	
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 he 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 compatib	ility determin	ation may be	required

Replat Status			
Is this plat a replat of a plat approved and/or recorded after March 20, 1979?	□ Yes	🖾 No	Don't Know
If YES, please answer the following question	S.		
Project Name of underlying approved and/or recorded plat N/A	Project Nur	mber	
Is the underlying plat all or partially residential?	□ Yes	🛛 No	Don't Know
If YES, please answer the following questions	S.		
Number and type of units approved in the underlying plat. N/A - SITE HAS NOT BEEN PLATTED			
Number and type of units proposed to be deleted by this replat. $N\!/\!A$			
Difference between the total number of units being deleted from the underlying plat and the number of units pro	posed in this r	eplat.	
N/A			

School Concurrency (Residential Plats, Replats and Site Plan Submissions)		
Does this application contain any residential units? (If "No," skip the remaining questions.)	🛛 Yes	□ No
If the application is a replat, is the type, number, or bedroom restriction of the residential units changing?	□ Yes	🖾 No
If the application is a replat, are there any new or additional residential units being added to the replat's note restriction?	□ Yes	🖾 No
Is this application subject to an approved Declaration of Restrictive Covenants or Tri-Party Agreement entered into with the Broward County School Board?	□ Yes	🛛 No
If the answer is "Yes" to any of the questions above RESIDENTIAL APPLICATIONS ONLY: Provide a receipt from the School Board documenting the Impact Application (PSIA) and fee have been accepted by the School Board for residential project concurrency, exempt from school concurrency (exemptions include projects that generate less than one scommunities, and projects contained within Developments of Regional Impact), or subject to an app	cts subject tudent, age	t to school e restricted

Restrictive Covenant or Tri-Party Agreement.



PROPOSED
Land Use Plan Designation(s)
No change (flex will be used)
Zoning District(s)
R-1-D (Single family 6,000 sf lot)

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

			EXISTING STUCTURE(S)			
Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	Remain the Same?	Change Use?	<u>Has</u> been or <u>will</u> be Demolished?	
Single-family dwellings (to remain as part of "Parcel B")	1 DU	current	YX INO	YES 🙀	HAS WILL 🕅	
Single-family dwellings (to be demolished)	1 DU	current	YES 🎘	YXXS NO	HAS V)K(L NO	
Stables and trailer (to be demolished)			YES 🙀	YXXS NO	HAS VX L NO	
*Gross non-residential square footage includ		anopies ar				

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		
Single-family dwellings	40 units (inc. 1 existing)	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 personner/for the purpose of verification of information provided by owner/agent.
Juliantotiko 6/30/2020
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 <u>30/</u> day of <u>June</u> , 20 <u>20</u> , who P is personally known to me D has produced
as identification.
ATRICIA A. MANUELINGT Name of Notary Typed, Printed of Standed A. G. B. Signature of Notary Public - State of Florida
Name of Notary Typed, Printed of Standed 7. 5. 6/6 Signature of Notary Public – State of Florida
The second se
₹ #GG 163331
Notary Seal (or Title or Rank)
Unit of the state of this state of this state of the stat
For Office Use Only
For Office Use Only Application Type
MUNI PUST
Application Date Acceptance Date Fee \$2,325
Comments Due 9/9/20 Report Due 9/23/20 CC Meeting Date 0/23/20 0/23/20 0/20
Adjacent City or Cities TOWN OF DONIE
Plats Durveys Site Plans Landscaping Plans Lighting Plans
City Letter Agreements
Other: School BO RECEIPT; CITY RECEIPTS; TITLE NORK; BCPD NOTICE
Distribute To Full Review Distribute To Full Review Distribute To Distri
□ Health Department □ Zoning Code Services (BMSD only) □ Administrative Review
□ Other:
Received By HW. CHREKE I.





Application Number 019-MP-20

Development and Environmental Review Online Application Questionnaire Form

Ту	/pe	of Application				
	E	⊠ Plat		⊐ Note Amer	ndment	
Pi	oje	ect Questionnaire				
Ple	ease	answer the questions marked for the type of applic	ation checked.			
Х	1.	Why is this property being platted? Attach an ad	ditional sheet(s) if necessar	y.		
		he property is not included in a plat record ubsequent to June 4, 1953, and thus mus				nty
X	2.	Is this project within an existing Development of Development (FQD)? If "Yes", indicate DRI or FC or Official Record Book and Page Number.	Regional Impact (DRI) or Flo QD name and Latest Ordinar	rida Quality nce number	□ Yes	🛛 No
	DI	RI Name	FQD Name			
	La	atest Ordinance Number	Official Record Book and Page N	lumber		
X	3.	Is the project subject to any existing or proposed a municipality? If "Yes", state the title and subj copy(s).			□ Yes	🖾 No
	4.	Is any portion of this plat currently the subject of	a Land Use Plan Amendme	nt (LUPA)?	□ Yes	□ No
	5.	Does the note represent a change in TRIPS?	□ Increase	Decrease	🗆 No	Change
	6.	Does the note represent a major change in Land	l Use?		□ Yes	□ No
Х	7.	Are any off-site roadway improvements being reproposed by the applicant? If "Yes", attach any s		agency or	□ Yes	🖾 No
\times	8.	Does this property or project have an adjudicated attach the appropriate documentation.	or vested rights status? If "Y	es", please	□ Yes	🛛 No
\times	9.	Does the owner have any financial interest in pro If "Yes", please attach a sheet(s) and describe fu		nis project?	□ Yes	🛛 No
×	10.	. Does this property abut a State Road? If "Ye Requirement No. 19 for required letter from ((FDOT).	s", see Supplemental Docu Florida Department of Trar	umentation nsportation	□ 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
\times	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
×	 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	 Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted. 	🛛 Yes	□ No
	Name/Title LINDA HOUCHINS		
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. See wetland jurisdiction letter.	🛛 Yes	□ No
\times	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
\times	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
\times	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 COOPER CITY WATER TREAMENT PLANT Address		
	5650, 5700, AND 5800 SW 106 AVE		
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 COOPER CITY WASTEWATER TREATMENT PLANT	= 1 _{4 11}	
	Address 3563 NW 53RD STREET		



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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 N/A		
Х	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 NANCY DIAZ-QUINONES, ENGINEER AT&T – Name/Title		
X	27. Estimate or state the total number of on-site parking spaces to be provided.	Spaces 120	
\times	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	

