



Application Number 035-MP-21

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 Ocean Park			
Plat/Site Number		Plat Book - Page (if recorded)	
Owner/Applicant/Petitioner Name Mount Vernon Property Holdings LLC			
Address 250 NE 25 ST SU 203		City Miami	State FL
Phone 954-632-5779		Email tomas.sinisterra@strategicproperties.com	
Agent for Owner/Applicant/Petitioner KEITH		Contact Person Andrea Harper	
Address 301 E Atlantic Blvd		City Pompano Beach	State FL
Phone 954-788-3400		Email aharper@keithteam.com	
Folio(s) 48 43 29 01 0070		- Pompano Bch	
Location East _____ side of <u>N Ocean Blvd</u> at/between/and <u>SE corner of</u> and/of <u>NE 16 Street</u> <small>north side/corner north street name street name / side/corner street name</small>			

<p>Type of Application (this form required for all applications)</p> <p>Please check all that apply (use attached Instructions for this form).</p> <p><input checked="" type="checkbox"/> Plat (fill out/PRINT <i>Questionnaire Form, Plat Checklist</i>)</p> <p><input type="checkbox"/> Site Plan (fill out/PRINT <i>Questionnaire Form, Site Plan Checklist</i>)</p> <p><input type="checkbox"/> Note Amendment (fill out/PRINT <i>Questionnaire Form, Note Amendment Checklist</i>)</p> <p><input type="checkbox"/> Vacation (fill out/PRINT <i>Vacation Continuation Form, Vacation Checklist</i>, use <i>Vacation Instructions</i>)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Vacating Plats, or any Portion Thereof (BCCO 5-205)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Abandoning Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 27.29)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Releasing Public Easements and Private Platted Easements or Interests (BCAC 27.30)</p> <p><input type="checkbox"/> Vacation (Notary Continuation Form Affidavit required, fill out <u>Business Notary</u> if needed)</p>
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Application Status			
Has this project been previously submitted?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Don't Know
This is a resubmittal of:	<input type="checkbox"/> Entire Project	<input 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 type="checkbox"/> Don't Know
Project Name		<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 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 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 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 type="checkbox"/> Yes <input checked="" 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 High	Land Use Plan Designation(s) Residential High
Zoning District(s) PD-I	Zoning District(s) PD-I

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 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.

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?
			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 is 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
High Rise	28	Commercial (unrestricted)	4,000 SF

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.

And S. H. J.
Owner/Agent Signature _____ Date 11/18/21

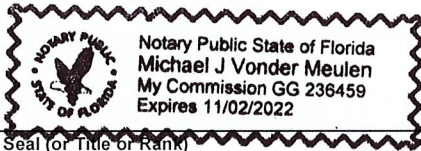
NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of physical presence | online notarization, this 18th day of November, 2021, who is personally known to me | has produced _____ as identification.

Michael Vonder Meulen
Name of Notary Typed, Printed or Stamped

[Signature]
Signature of Notary Public – State of Florida



Notary Seal (or Title or Rank)

GG 236459
Serial Number (if applicable)

For Office Use Only

Application Type MUNI PLAT

Application Date <u>11/29/21</u>	Acceptance Date <u>12/9/21</u>	Fee <u>\$4,780</u>
Comments Due <u>12/29/21</u>	Report Due <u>1/10/21</u>	CC Meeting Date <u>N/A</u>
Adjacent City or Cities <u>NONE</u>		
<input checked="" type="checkbox"/> Plats <input checked="" type="checkbox"/> Surveys <input checked="" type="checkbox"/> Site Plans <input type="checkbox"/> Landscaping Plans <input type="checkbox"/> Lighting Plans <input type="checkbox"/> City Letter <input type="checkbox"/> Agreements		
<input checked="" type="checkbox"/> Other: <u>TITLE WORK; SCHOOL RECEIPT; CH PROOF, BCPS NOTICE</u>		
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		
<input type="checkbox"/> Other:		
Received By <u>H.V. CLARKE</u>		



Application Number 035-MY-21

Development and Environmental Review Online Application Questionnaire Form

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

Project Questionnaire					
Please answer the questions marked for the type of application checked.					
X	1. Why is this property being platted? Attach an additional sheet(s) if necessary. Old Plat				
X	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 checked="" 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				
X	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 checked="" 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 If YES, LUPA Number				
	5. Does the note represent a change in TRIPS? <input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> No Change				
	6. Does the note represent a major change in Land Use? <input type="checkbox"/> Yes <input type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> 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.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table border="1" style="width: 100%;"> <tr> <td style="padding: 2px;">Name/Title</td> </tr> <tr> <td style="padding: 2px;">Lisa Wight, Planner</td> </tr> </table>			Name/Title	Lisa Wight, Planner		
Name/Title						
Lisa Wight, Planner						
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" type="checkbox"/> No				
X	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 checked="" 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				
<table border="1" style="width: 100%;"> <tr> <td style="padding: 2px;">Facility Name</td> </tr> <tr> <td style="padding: 2px;">Pompano Beach Water Utility</td> </tr> <tr> <td style="padding: 2px;">Address</td> </tr> <tr> <td style="padding: 2px;"> </td> </tr> </table>			Facility Name	Pompano Beach Water Utility	Address	
Facility Name						
Pompano Beach Water Utility						
Address						
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				
<table border="1" style="width: 100%;"> <tr> <td style="padding: 2px;">Facility Name</td> </tr> <tr> <td style="padding: 2px;">North Regional Waste Water Treatment Plant</td> </tr> <tr> <td style="padding: 2px;">Address</td> </tr> <tr> <td style="padding: 2px;"> </td> </tr> </table>			Facility Name	North Regional Waste Water Treatment Plant	Address	
Facility Name						
North Regional Waste Water Treatment Plant						
Address						

X	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
X	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 checked="" type="checkbox"/> No <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Solid Waste Collector Waste Management</div>
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. <input type="checkbox"/> Yes <input type="checkbox"/> No <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FPL – Name/Title Mike Keightly, Senior Engineer</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">AT&T – Name/Title Martain Barrett</div>
X	27. Estimate or state the total number of on-site parking spaces to be provided. Spaces 75
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. Seating N/A



Ocean Park Plat Narrative

The proposed plat is a 0.86-acre parcel located at 1508 N Ocean along the east side of Highway A1A, South of NE 16th Street, west of the City of Pompano Beach's North Ocean Park. The site is vacant land with one folio number: 484329010070. The proposed development would feature a 19-story mixed-use project with 28 residential condominium dwelling units and approximately 3,526 square feet of commercial space. The property will need to be replatted.

The applicant believes the plat meets or exceeds all applicable standards in Article 2, Part 4. The proposed project will be reviewed as a major site plan and major building design and is expected to comply with all zoning requirements. Concurrent with the application for major site plan and major building design is an Air Park Obstruction permit application. The site plan application PZ21-12000037 is currently under DRC review.

It is anticipated that all new development orders issued for the new project will supersede all previous development orders will receive a concurrency certificate from the City of Pompano Beach as part of the major site plan and major building design application. In July of 2019, the Pompano Beach City Commission approved the PD-I rezoning for the property. The site is subject to the PD-I rezoning and Ordinance NO. 2019 -81.

The Ocean Park project will be designed to provide safe, adequate, paved vehicular access between the building and State Road A1A which is identified as an 80-foot collector on the Broward County Trafficways Map. The design team has met with the Florida Department of Transportation (FDOT) which has final jurisdiction over the roadway and has received a pre-application letter. A copy of that letter has been provided as part of this submittal.

The project site is not located within a wellfield protection area. The project does not anticipate requiring any hazardous material licensing. The applicant has contacted all city and franchised utility companies. All companies have or will provide service availability letters. The one received are included as part of this application. It is anticipated that all future utilities will be placed underground.

The KEITH Team looks forward to discussing and presenting the Ocean Park plat with the City of Pompano Beach and Broward County.

Respectfully Submitted,

A handwritten signature in blue ink, appearing to read 'Andrea Harper'.

Andrea Harper

Board of County Commissioners, Broward County, Florida
 Resilient Environment Department
 Urban Planning Division
Project Update Sheet

Plat/Site Plan Number 035-MP-21

INSTRUCTIONS

Use this update form in lieu of filling out a new plat/site plan application form whenever a project goes from one review to another or whenever new information is submitted. Complete the applicable sections of this form only if the information has changed from the previous submittal. If you do not have a copy of your previous application forms, obtain a copy from this office. Any section left blank indicates that the information on the original (previous) application has not changed. Supplemental documentation requirements are listed on the reverse side of the "Project Questionnaire" form, page 3, available from this office. Please type this application or print legibly in **black ink**.

PROJECT REVISIONS

Plat/Site Plan Name Ocean Park Pompano Beach

Owner's Name _____ Phone _____

Address _____ City _____ State _____ Zip Code _____

Owner's E-mail Address _____ Fax # _____

Agent _____ Phone _____

Contact Person _____

Address _____ City _____ State _____ Zip Code _____

Agent's E-mail Address _____ Fax # _____

EXISTING	PROPOSED
Land use plan designation(s) _____	Land use plan designation(s) _____
Zoning District(s) _____	Zoning District(s) _____

A credit against impact fees may be given for the site's present or previous use if there are existing buildings on the property and/or if buildings were demolished within eighteen (18) months of this application. To receive a credit, complete the following table (attach an additional sheet if necessary). (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 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.

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?

*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 is defined by the definition in the Land Development Code.

Please specify the proposed use in accordance with the land use categories listed on the reverse side of the "Project Characteristics form, page 2, available from this office. Please Note: Residential uses must be expressed based upon DWELLING UNIT TYPES listed on the reverse side of page 2. COMMERCIAL, OFFICE, and CHURCH USES must be expressed in terms of gross building square footage. If there are any unique factors which may affect traffic generation, attach a separate sheet and describe fully.

Has 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 compatibility determination may be required.

RESIDENTIAL UNITS		NON-RESIDENTIAL UNITS	
Type of Unit	Number of Units	Land Use	Net Acreage or Gross Floor Area

SCHOOL CONCURRENCY (Residential Submissions Only)

Does the change to the application generate less than one (1) student? Yes No

Is this application exempt or vested pursuant to criteria in the Land Development Code? Yes No

If the answers to both questions are "No," please see reverse side of Page 3, Required Documentation section of the Plat/Site Plan application for submittal requirements.

Is this application subject to an approved Declaration of Restrictive Covenant or tri-party agreement? Yes No

If "Yes," please see reverse side of Page 3, Required Documentation section of the Plat/Site Plan application for submittal requirements.

FOR PLANNING AND DEVELOPMENT MANAGEMENT DIVISION USE ONLY

Application Type PROJECT UPDATE Time _____ Application Date 1/13/22

Acceptance Date 1/15/22 Fee N/A Comments Due NOT REQUIRED

Report Due _____ Adjacent City NONE

Plats Surveys Site Plans Landscaping Plans Lighting Plans

Other (Describe) _____ Received By _____

Comments REVISING PLAT NAME DUE TO A CONFLICT WITH A SIMILAR PLAT NAME.

NOTE: NO RESPONSE IS REQUIRED

Questionnaire Changes

Please review all questions on the "Project Questionnaire" form, Page 3, and indicate any revisions.	
Question Number	Revised information or Attachments Supplied
	This request is to amend the plat name from "Ocean Park" to "Ocean Park Pompano Beach Plat" due to (Ocean Park) having the same on an existing plat (Ocean Park PB6. Page 5).

Comments and Additional Information

REVISING PLAT NAME FROM: OCEAN PARK
TO: OCEAN PARK POMPONO BEACH

Owner/Agent Certification

State of Florida
County of Broward

This is to certify that I am the owner/agent of the property described in this application and that all changes to the original application and supplemental documents supplied herein are true and correct to the best of my knowledge. If no changes are indicated on this update sheet or in the attached supplemental documentation, then this certifies that the information supplied on the original application 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 of owner/agent Andrea Harper
Sworn and subscribed to before me this 12th day of January, 2022
by Andrea Harper He/she is personally known to me or
 Has presented _____
Signature of Notary Public Michael J. Vonder Meulen
Type or Print Name Michael Vonder Meulen

