BROWARD COUNTY FLORIDA

Application Number 032-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: BESAY			
Plat/Site Number	Plat Book - Page (if recorded)		
Owner/Applicant/Petitioner Name: David Besay			
Address: 4431 Bramwell Drive	City: Stone Mountain	State: GA	Zip: 30083
Phone: (404) 931-2224	Email: MBesay@hotmail.com		
Agent for Owner/Applicant/Petitioner: PULICE LAND SURVEYORS, INC.	Contact Person: Elizabeth Tsouroukdissian		
Address: 5381 Nob Hill Road	City: Sunrise	State: FL	Zip: 33351
Phone: (954) 572-1777	Email: elizabeth@pulicelandsurveyors.com		
Folio(s): 504112010240 – PLANTATION			

Location

West (*north side/corner north*) side of State Road 7 (*street name*) at/between/and SW 2nd Street (*street name / side/corner*) and/of _____ (*street name*)

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)

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
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 compatibility determination 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 questions.

Project Name of underlying approved and/or recorded plat	Project Number

Is the underlying plat all or partially residential? ☐ Yes ☐ No ☐ 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.)	☐ 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 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) Local Activity Center	Land Use Plan Designation(s) SAME
Zoning District(s) B-HC Gateway Hybrid Commercial	Zoning District(s) SAME

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 STUCTURE(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 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**
		Commercial	4,500 sq. ft.

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.

Owner/Agent Signature — Date: 10-20-21

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☒ physical presence | ☐ online notarization, this 20th day of October, 20 21, who ☒ is personally known to me | ☐ has produced _____ as identification.

Name of Notary Typed, Printed or Stamped

Signature of Notary Public – State of Florida

LISA STASSUN
Commission # GG 964583
Expires March 21, 2024
Bonded Thru Budget Notary Services

Notary Seal (or Title or Rank)

Serial Number (if applicable)

For Office Use Only

Application Type: MUNI PLAT

Application Date	Acceptance Date	Fee
10/21/21	10/29/21	$4,180
Comments Due	**Report Due**	**CC Meeting Date**
11/18/21	11/29/21	N/A

Adjacent City or Cities: FT. LAUDERDALE

☒ Plats ☒ Surveys ☒ Site Plans ☐ Landscaping Plans ☐ Lighting Plans
☐ City Letter ☐ Agreements

☒ Other: TITLE WORK; POST LETTER, BCPA NOTICE, GIS PROOF

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

☐ Other:

Received By: H.V. CLARKE

Application Number 032-MP-21

Development and Environmental Review Online Application Questionnaire Form

Type of Application

☒ Plat ☐ Site Plan ☐ 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. Does not meet the "delineated lot of record" rule. Platting is required for development.	
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.	☐ Yes ☒ No
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).	☐ Yes ☒ No
	4. Is any portion of this plat currently the subject of a Land Use Plan Amendment (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 Use?	☐ Yes ☒ 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.	☐ Yes ☒ No
X	8. Does this property or project have an adjudicated or vested rights status? If "Yes", please attach the appropriate documentation.	☐ Yes ☒ 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.	☐ Yes ☒ 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).	☒ Yes ☐ No

DRI Name	FQD Name
Latest Ordinance Number	Official Record Book and Page Number

If YES, LUPA Number

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
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.)	☐ Yes	☒ No
X	14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted. Name/Title	☐ Yes	☒ No
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
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.	☐ Yes	☒ 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).	☐ Yes	☒ 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).	☐ Yes	☒ 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.	☐ Yes	☒ 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).	☐ 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. Facility Name: Plantation Central Water Treatment Plant Address: 550 NW 65th Avenue, City of Plantation	☒ Yes	☐ No
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
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. Facility Name: Plantation Central Water Treatment Plant Address: 550 NW 65th Avenue, City of Plantation	☒ Yes	☐ No

X	24. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter.	☐ Yes ☒ No
X	25. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector. Solid Waste Collector	☐ Yes ☒ No
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. FPL – Name/Title AT&T – Name/Title	☐ Yes ☒ No
X	27. Estimate or state the total number of on-site parking spaces to be provided.	Spaces 19
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