



Resilient Environment Department
URBAN PLANNING DIVISION
1 N. University Drive, Box 102A · Plantation, FL 33324
T: 954-357-6666 F: 954-357-6521
Broward.org/Planning

Review and Approval of Vacation Petition Application

Review

Date: 02-25-2025

To: County Attorney's Office Attention: Maite Azcoitia, Office of County Attorney

From: Urban Planning Division

Subject: Vacation Petition No.: 2025-V-02

Petitioner(s): City of Sunrise

Agent for Petitioner(s): Craven, Thompson & Associates, Inc.

Type: ☒ Vacating Plats, or any Portion Thereof (BCCO 5-205)
☒ Abandoning Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 27.68)
☐ Releasing Public Easements and Private Platted Easements or Interests (BCAC 27.69)

Project: ☐ Easement ☒ Right-of-Way ☐ Other

Pursuant to Florida Statute Chapter 177.101 and the above sections of the Broward County Administrative Code and Code of Ordinances, the following determined that the requested vacation petition would not affect the ownership or right of convenient access of persons owning other parts of the subdivision:

Designated Review Agencies and Organizations

Date: _____

Required Documentation

- ☒ Vacation Petition Application Date Accepted: 1/24/2025
- ☒ File Fee (made payable to **Broward County Board of County Commissioners** and deposited)
- ☒ Petitioner Notice of Intent Dates Published: 12/11/2024 and 12/18/2024
- ☒ Certificate of Real Estate Taxes Paid [Revenue Collection Division] Date: 11/20/2024
- ☒ Property Location ☒ Municipality of City of Sunrise ☐ Municipal Service District
- ☒ Certified Copy of Municipal Resolution No: 25-4 Date(s): 01/15/2025
- ☒ Sketch and Legal Description by: Richard G. Crawford Jr.
- ☒ Location Map (Created by County Surveyor)
- ☐ Aerial Photograph and Section Map (No longer provided; advise if needed for review)
- ☒ Plat, if applicable ☐ Certified ☒ Copy
- ☐ Written Consent of All Abutting Owners in Plat, if applicable
- ☒ Certificate or Opinion of Title by: Kyle R. Saxon Date: 01/10/2025
- ☒ Documentation of all reviewers responding "no objection/no comment"
- ☒ Waivers of Objection by Utility Companies
- ☒ Draft Resolution to Set Public Hearing
- ☒ Draft Resolution of Adopted Vacation

Approval

Approved subject to the Office of the County Attorney's receipt, review, and approval of a Title Certificate dated within 45 days prior to the Public Hearing.

Reviewed and Approved as to Form by: ALEXIS MARRERO-KORATICH
Digitally signed by ALEXIS MARRERO-KORATICH
Date: 2025.02.26 14:30:44 -05'00'

Print Name: Alexis Marrero Koratich

Date: 2/26/2025



Application Number 2025-V-02

Development and Environmental Review Online Application

Project Information			
Plat/Site Plan Name Sawgrass Commercial Plat			
Plat/Site Number 184-MP86		Plat Book - Page (if recorded) PB 154 PG 1	
Owner/Applicant/Petitioner Name City of Sunrise			
Address 10770 W Oakland Park Blvd		City Sunrise	State FL
Zip 33323			
Phone 954-786-3430	Email citymanager@sunrisefl.gov		
Agent for Owner/Applicant/Petitioner Craven, Thompson & Associates, Inc.		Contact Person Matt Edge	
Address 3563 NW 53rd Street		City Fort Lauderdale	State FL
Zip 33309			
Phone 954-739-6400	Email medge@craventhompson.com		
Folio(s) 494024180010			
Location North side of W Oakland Park Blvd at/between/and Sawgrass Expressway and/of NW 120th Way <small>north side/corner north street name street name / side/corner street name</small>			

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 type="checkbox"/> Note Amendment (fill out/PRINT <i>Questionnaire Form, Note Amendment Checklist</i>)
<input checked="" type="checkbox"/> Vacation (fill out/PRINT <i>Vacation Continuation Form, Vacation Checklist, use Vacation Instructions</i>)
<input checked="" type="checkbox"/> Vacating Plats, or any Portion Thereof (BCCO 5-205)
<input checked="" 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 checked="" 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 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 checked="" type="checkbox"/> N/A
What was the project number assigned by the Urban Planning Division?	Project Number	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Don't Know
Project Name		<input checked="" 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 type="checkbox"/> Yes <input checked="" 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) Commercial	Land Use Plan Designation(s) Commercial
Zoning District(s) B-3	Zoning District(s) B-3

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>					
Are there any existing structures on the site?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
<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 is 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
		Hospital	515,000 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 10/25/29

NOTARY PUBLIC

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☒ physical presence | ☐ online notarization, this 25 day of October, 2029, who ☒ is personally known to me | ☐ has produced _____ as identification.


Name of Notary Typed, Printed or Stamped




Signature of Notary Public - State of Florida

Notary Seal (or Title or Rank)

Number (if applicable)

For Office Use Only

Application Type

Vacation Application

Application Date <u>1/17/2025</u>	Acceptance Date <u>1/24/2025</u>	Fee <u>\$1,200</u>
Comments Due <u>2/24/2025</u>	Report Due <u>N/A</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: Narrative, sketch and legal description

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

☐ Other:

Received By

Nataly Miguez



Application Number _____

AFFIDAVIT TO AUTHORIZE PETITIONER'S AGENT

I/We, Mark S. Lubelski, the property owner(s) ("Affiant") of the property to be vacated in the subject of the Application, being duly sworn, depose(s) and say(s):

1. That I/we am/are the owner(s) and record title holder(s) of the lands that are to be vacated and abandoned.

My/our folio number(s) is/are as follows:

494024180010

2. That I/we do hereby appoint the following Agent to act on my/our behalf in the processing of the subject of the Application to the Broward County Board of County Commissioners.

Name: Craven, Thompson & Associates, Inc.

Address: 3563 NW 53rd Street

City, State, Zip: Fort Lauderdale, FL 33309

Telephone: 954-739-6400

Contact Person: Matt Edge

Mark S. Lubelski
Name of Owner/Petitioner

10/31/24
Date

[Signature]
Signature of Owner/Petitioner (requires notarization)

I, Matt Edge, hereby accept the appointment as Agent to the above listed owner/petitioner.

Matt Edge
Name of Agent

11/1/24
Date

[Signature]
Signature of Agent

NOTARY PUBLIC

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by the Affiant by means of

☒ physical presence | ☐ online notarization, this 31 day of October, 2024,

by Mark S. Lubelski, of Broward County, on behalf of City of Sunrise.

He/she ☒ is personally known to me | ☐ has produced _____ as identification.

Juliana Castro
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)



Application Number _____

NOTARY PUBLIC: Business/Government Entity Certification

This is to certify that I am the authorized acting agent of the business/government entity that is 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 authorized acting agent of the business/government entity.

[Signature]
Agent Signature for Business/Government Entity

12/30/24
Date

NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of ☒ physical presence | ☐ online notarization, this 30th day of December, 2024, by Mark Wbelski, the City Manager, on behalf of the City of Sunrise, a _____.

He/she ☒ is personally known to me | ☐ has produced _____ as identification.

Emilie R. Smith
Name of Notary Typed, Printed or Stamped

[Signature]
Signature of Notary Public – State of Florida



EMILIE R. SMITH
Commission # HH 107007
Expires March 22, 2025
Bonded thru Budget Notary Services

Notary Seal (or Title or Rank)

Serial Number (if applicable)

Holland & Knight

515 E. Las Olas Boulevard, Suite 1200 | Fort Lauderdale, FL 33301 | T 954.525.1000 | F 954.463.2030
Holland & Knight LLP | www.hklaw.com

Janna P. Lhota
+1 954-468-7841
Janna.Lhota@hklaw.com

October 7, 2024

Ms. Jennifer Lu-Chong, AICP I
Planning Section Manager
Broward County Resilient Environment Department
Urban Planning Division
1 N. University Drive, Box 1002
Plantation, Florida 33324

Re: Sawgrass Commercial Plat (PB 154/Page 1) – Right of Way Vacation

To Ms. Lu-Chong:

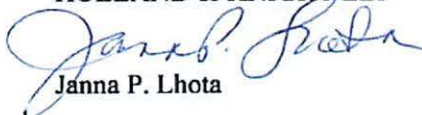
Holland & Knight LLP represents Baptist Health South Florida, Inc. (“Baptist Health” or the “Applicant”), the contract-purchaser of the property located at 12401 West Oakland Park Boulevard (the “Property”) (Tax Folio ID No. 4940-24-18-0010) in the City of Sunrise, Florida (the “City”). The Property comprising the Plat is zoned B-3 (General Business District), is designated “Commercial” on the City’s Future Land Use Map and “Commerce” on the County’s BrowardNext – Broward County Land Use Map.

Baptist Health proposes the development of a community hospital on the Property. The Property totals 26.26 acres of vacant land. The majority of the Property is located within the Sawgrass Commercial Plat (“Plat”) (Plat Book 154, Page 1) (25.520 acres). A small portion of the Property, on which no building improvements are proposed, is located within the Florida Fruit Lands Company’s Subdivision No. 1 Plat (Plat Book 2, Page 17) and includes a 15’ right-of-way dedication. The current application seeks to vacate this remnant right-of-way (totaling approximately 177.69 linear feet) within the Property. This application is the subject of a pending application with the City and a certified copy of the approval will be provided to the County upon receipt.

If you have any questions or require additional information, please do not hesitate to contact our office.

Sincerely yours,

HOLLAND & KNIGHT LLP



Janna P. Lhota