



Plat/Site Plan Number 047-MP-19
~~036 MP-18~~ (M)

Environmental Protection and Growth Management Department
PLANNING AND DEVELOPMENT MANAGEMENT DIVISION
1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-8695 F: 954-357-6521 · Broward.org/Planning

Plat/Site Plan Application

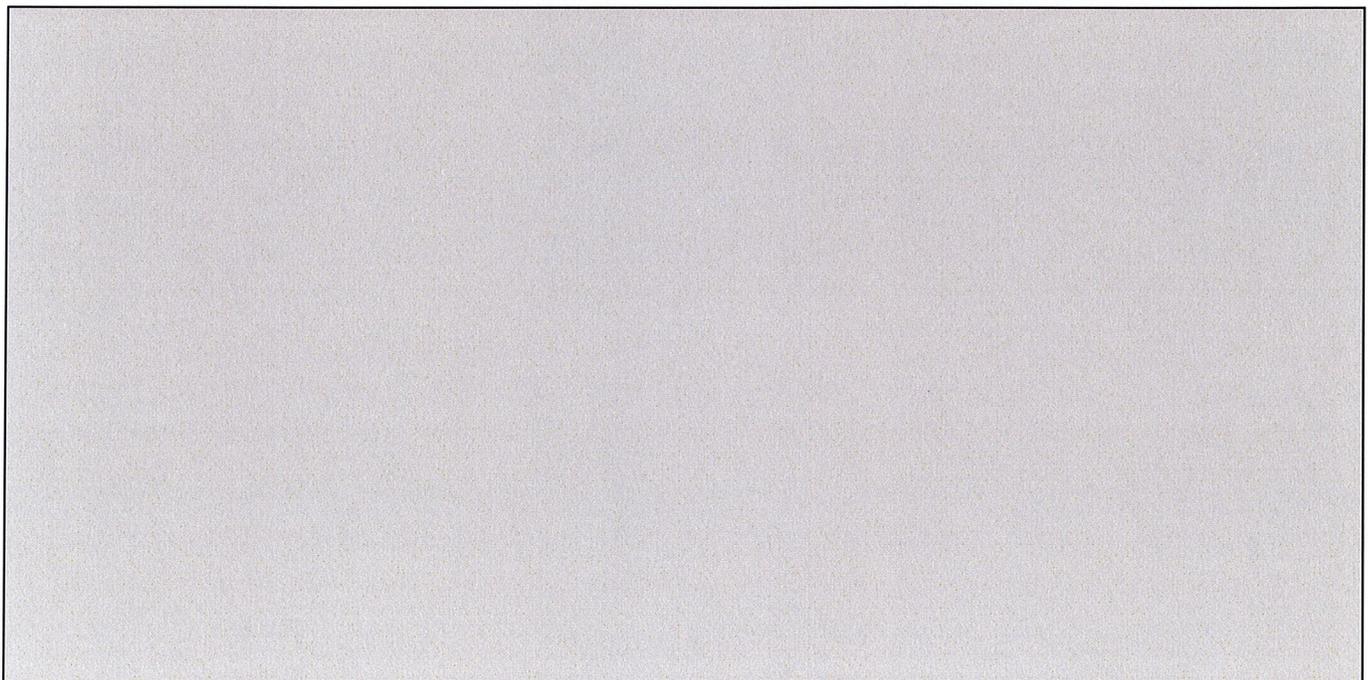
I. Project Information			
Plat/Site Plan Name Aquatic Stone			
Owner/Applicant Name Unibuilders Development Co., LLC			
Address 451 SW 12th Avenue		City Pompano Beach	State FL
Zip 33069			
Phone (954) 968-1099	Email etem@aquaticstone.com	FAX	
Agent KEITH		Contact Person Michael Vonder Meulen, AICP	
Address 301 East Atlantic Boulevard		City Pompano Beach	State FL
Zip 33060			
Phone (954) 788-3400	Email mvondermeulen@KEITHteam.com	FAX (954) 788-3500	
Location West side of SW 12th Avenue at/between/and Race Track Road and/of SW 6th Street north side/corner north street name street name / side/corner street name			

II. Application Status			
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 checked="" 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 036-MP-18	<input type="checkbox"/> N/A <input type="checkbox"/> Don't Know
Project Name Unibuilders Development Company			<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	
If yes, consult Policy 13.01.10 of the Land Use Plan. A compatibility determination may be required.			

City: Pompano Sec/Tw/Pln: 2/49/42

III. 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 N/A	Project Number N/A
Is the underlying plat all or partially residential? <input type="checkbox"/> Yes <input checked="" 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. N/A	
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 proposed in this replat. N/A	

IV. 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 questions 1-4, please see the "Required Documentation" for "School Concurrency Submission Requirements."	



V. Land Use and Zoning	
EXISTING	PROPOSED
Land Use Plan Designation(s) Industrial	Land Use Plan Designation(s) Industrial
Zoning District(s) I-1	Zoning District(s) I-1

VI. 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.

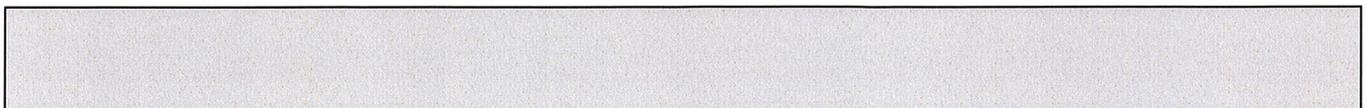
Are there any existing structures on the site? Yes No

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?
Office	3,544	Current	YES NO	YES NO	HAS WILL NO
Office	3,749	Current	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.

VII. Proposed Use

RESIDENTIAL USES <input type="checkbox"/> N/A		NON-RESIDENTIAL USES <input type="checkbox"/> N/A	
Land Use	Number of Units/Rooms	Land Use	Net Acreage or Gross Floor Area
		General Industrial	75,000



VIII. Project Questionnaire

1. Why is this property being platted? Attach an additional sheet(s) if necessary.

To construct a new principal building - redevelop the site

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

DRI Name N/A	FQD Name N/A
Latest Ordinance Number N/A	Official Record Book and Page Number N/A

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. 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

5. Does this property or project have an adjudicated or vested rights status? If "Yes", please attach the appropriate documentation. Yes No

6. 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

7. 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

8. 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

9. 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

10. 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

11. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted. Yes No

Name/Title N/A

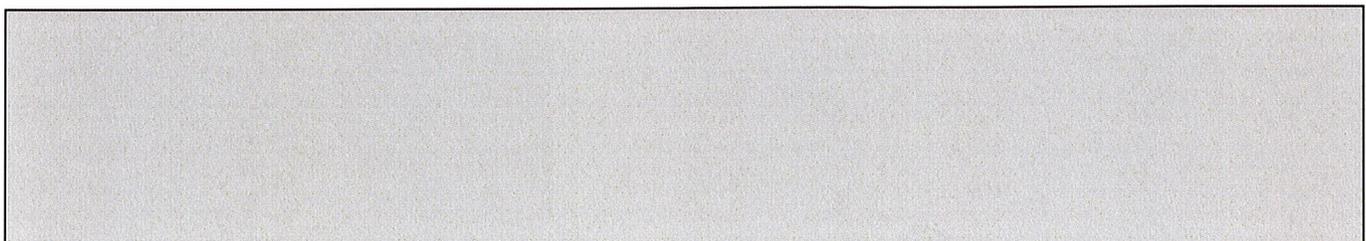
12. If a school site will be reserved or dedicated on the property, is the site delineated on the plat or site plan? Yes No

13. 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, Environmental Engineering and Permitting Division. Yes No

14. 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, Environmental Engineering and Permitting Division. Yes No

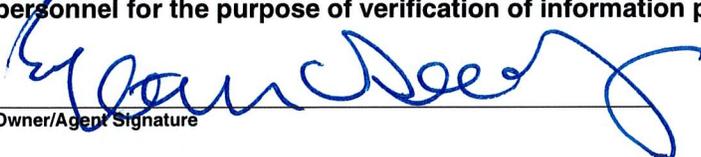
15. Does the property contain any portion of lands identified as an "Urban Wilderness Area" or "Vegetative Resource Category Local Area of Particular Concern?" If "Yes", please see Supplemental Documentation Requirement No. 9. For locations, contact Aquatic and Wetland Resources Section, Environmental Engineering and Permitting Division. Yes No

<p>16. 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, Planning and Development Management Division.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>17. 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, Environ Eng and Permit Division.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>18. Is the project to be served by an approved potable water system? If "Yes", state the name of facility and facility address.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Facility Name</td> <td>Pompano Beach Utilities</td> </tr> <tr> <td style="padding: 2px;">Address</td> <td>100 West Atlantic Boulevard, Pompano Beach, FL 33060</td> </tr> </table>		Facility Name	Pompano Beach Utilities	Address	100 West Atlantic Boulevard, Pompano Beach, FL 33060
Facility Name	Pompano Beach Utilities				
Address	100 West Atlantic Boulevard, Pompano Beach, FL 33060				
<p>19. Is this project to utilize on-site wells for its potable water? If "Yes", see Supplemental Documentation Requirement No. 13 for required letter.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>20. Is this project to be served by an approved wastewater (sewage) treatment plant? If "Yes", state the name of facility and facility address.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Facility Name</td> <td>Broward County Wastewater Services</td> </tr> <tr> <td style="padding: 2px;">Address</td> <td>2555 West Copans Road, Pompano Beach, FL 33069</td> </tr> </table>		Facility Name	Broward County Wastewater Services	Address	2555 West Copans Road, Pompano Beach, FL 33069
Facility Name	Broward County Wastewater Services				
Address	2555 West Copans Road, Pompano Beach, FL 33069				
<p>21. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>22. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Solid Waste Collector</td> <td>Waste Management</td> </tr> </table>		Solid Waste Collector	Waste Management		
Solid Waste Collector	Waste Management				
<p>23. 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.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">FPL – Name/Title</td> <td>Christina Kale, Engineer II</td> </tr> <tr> <td style="padding: 2px;">AT&T – Name/Title</td> <td>Martin Barrett, MGR OSP Planning & Engineering Design</td> </tr> </table>		FPL – Name/Title	Christina Kale, Engineer II	AT&T – Name/Title	Martin Barrett, MGR OSP Planning & Engineering Design
FPL – Name/Title	Christina Kale, Engineer II				
AT&T – Name/Title	Martin Barrett, MGR OSP Planning & Engineering Design				
<p>24. Estimate or state the total number of on-site parking spaces to be provided.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Spaces</td> <td style="text-align: center;">30</td> </tr> </table>	Spaces	30		
Spaces	30				
<p>25. If applicable, state the seating capacity of any proposed restaurant or public assembly facility, including places of worship.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Seating</td> <td style="text-align: center;">n/a</td> </tr> </table>	Seating	n/a		
Seating	n/a				



IX. 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 11/6/19

**NOTARY PUBLIC
STATE OF FLORIDA, COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me this 6th day of November, 2019

By Ethem Oksayoglu (NOTARY SEAL)


 Signature of Notary Public - State of Florida _____
Lorena Gonzalez
 Name of Notary Typed, Printed or Stamped



LORENA GONZALEZ
Notary Public - State of Florida
Commission # FF 993365
My Comm. Expires May 17, 2020

Personally Known or Produced Identification

ID Type: _____

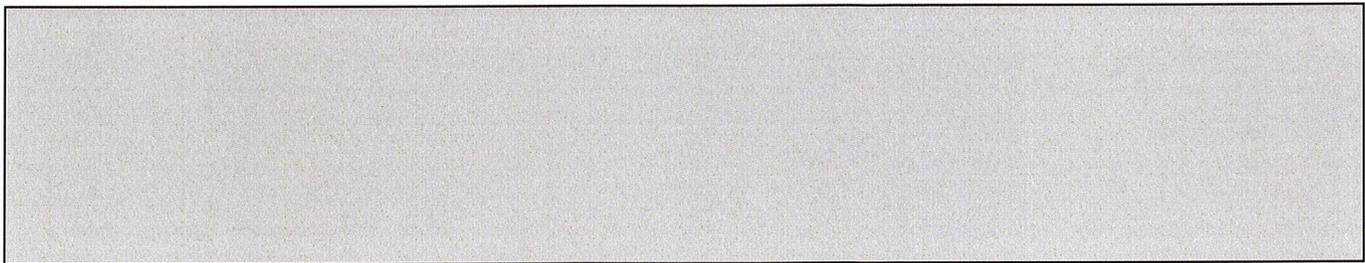
For Planning and Development Management Use Only

Application Type <u>MONI PLOT</u>	Time	Application Date <u>12/2/19</u>
Acceptance Date <u>12/12/19</u>	Fee <u>\$4,780</u>	Comments Due <u>01/14/20</u>
Report Due <u>01/29/20</u>	Adjacent City <u>NONE</u>	

Plats
 Surveys
 ~~Site Plans~~ ACCESS PLANS
 Landscaping Plans
 Lighting Plans

Other: Describe TITLE WORK Received By JP.

Comments
RESUBMITTED PLOT





-INDUSTRIAL REVIEW APPLICATION-

1. Name of project Unibuilders Development Co., LLC
 Street address of project 451 SW 12th Avenue
 City Pompano Beach, FL Zip Code 33069
2. Property owner Unibuilders Development Co., LLC
 Company name Aquatic Stone
 Contact Etem Oksavoglu Title Manager Phone 954-968-1099
 Mailing address 451 SW 12th Avenue, Pompano Beach, Florida 33069
3. If leased, tenant
 Company name _____
 Contact _____ Title _____ Phone _____
 Mailing address _____
4. Proposed use of building or property Industrial Warehouse
5. Expected project start date _____ Expected completion date _____
6. What, if any, products will be manufactured and what processes will be used? _____
7.

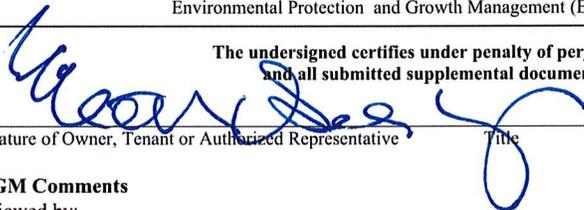
a) Do you presently have any industrial permits?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b) Will there be any discharges other than domestic sanitary waste?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c) Will this facility have any disposal wells, percolation ponds, soakage pits, or french drains?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d) Will there be any floor drains (other than rest rooms)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
e) Will any solvents be used in your processes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
f) Will any toxic/hazardous waste be produced?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
g) Will any industrial sludge be produced?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
h) Will any particulate matter or dust be produced?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
i) Will any strong or objectionable odors be emitted?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
j) Will any noise producing machinery such as grinders, chippers or hammering devices be used?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
k) Will any incineration be used on site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
l) Will there be any x-ray or photographic equipment used (other than copy machines)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
m) Will there be, or are there any existing, emergency generators involved in this project?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
n) Will there be any car, truck or equipment washing done at this site?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
o) Will any surface coating (painting) be performed at this site once the facility is in operation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
p) Will project utilize any above ground or underground storage tanks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
q) Will this facility be utilized to repair vehicles or equipment?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

If you answered YES to any of the preceding questions, please comment below or attach additional information.
 This information should list types of materials produced, disposal sites, volumes, and other general information relating to the subject.

8. Comments _____

WARNING Broward County Code of Ordinances prohibit industrial discharges to drainfields, disposal wells, percolation ponds, soakage pits, french drains, sanitary sewers or storm sewers without prior approval of the Broward County Environmental Protection and Growth Management (EPGM) Department.

The undersigned certifies under penalty of perjury, that the information herein and all submitted supplemental documentation is true and correct.

 _____ Title _____ Date 11/6/19

- EPGM Comments**
 Reviewed by: _____ Date _____
- Future industrial uses must be approved by the Environmental Protection Department.
 - A Hazardous Material license will / may be required upon operation of the facility.
 - No vehicle washing is permitted.
 - Current Environmental Protection Department Licenses for this facility must be kept active and valid.
 - All discharges other than storm water must be to a sanitary sewer system.
 - Septic Tank is for domestic waste only, No industrial discharges are permitted.
 - Other comments _____
- Well Field # _____ Zone# _____ WWTP _____

The undersigned has received a copy of the above comments by EPGM and understands that approval of this project is conditional to the acceptance of these comments by the applicant. The applicant agrees to the conditions set forth above and will construct or operate the project or facility accordingly.

Signature of Owner, Tenant or Authorized Representative _____ Title _____ Date _____

LETTER OF AUTHORIZATION

February 12, 2018

City of Pompano Beach
100 West Atlantic Blvd.
Pompano Beach, FL 33060

Broward County
1 North University Drive
Plantation, FL 33324

To Whom It May Concern:

Unibuilders Development Co. LLC, is the owner of the property generally located at 451 SW 12th Avenue (Andrews Ave.), within Pompano Beach, Broward County Florida.
The legal description is:

Acreage in 2-49-42 SOUTH 301 FEET OF A PORTION OF NW1/4 OF GOV LOT 5 LYING WEST OF ANDREWS AVE RIGHT-OF-WAY.

The folio number is 494202000210.

And I / We hereby authorize Patrick Valent Architects and Keith and Associates, Inc., to act on our behalf to make all necessary applications to obtain development approvals/entitlements and development permits for the above referenced property.



Print Name: Etem Okuyoglu

Unibuilders Development Co. LLC

Date: 2/14/2018