



**Public Works Department
REAL PROPERTY SECTION**
115 South Andrews Avenue (Room 501-RP)
Ft. Lauderdale, FL 33301
Phone 954-357-6826 FAX 954-357-5544

Exhibit 1
Page 2 of 6
Date Application Accepted:
6-25-2019

Application Number: *2019-V-09*

APPLICATION FOR VACATION AND ABANDONMENT

A. Vacation of Plats, or any Portion Thereof (BCAC 25.99)
 B. Abandonment of Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 25.100)
 C. Release of Public Easements and Private Platted Easements or Interests (BCAC 25.101)

PETITIONER INFORMATION

Petitioners (Owners):

Petitioner 1: Woodmont Country Club, INC.	Folio(s): 4941-04-28-0010
Address: 7801 N.W. 80TH AVE.	Phone: 954-722-4300
Address (cont'd):	Fax:
City, State Zip: Tamarac, FL 33321	Email:

Important: Proof of Property Ownership required.
 Note: For Co-Petitioners/Owners, complete additional Petitioner/Owner Information page(s).



AGENT INFORMATION

Agent for Petitioners: Keith & Associated, INC.

Contact Person: Michael Vonder Meulen, AICP	Phone 1: 954-788-3400
Address: 301 Atlantic Blvd	Phone 2:
Address (cont'd):	Fax:
City, State Zip: Pompano Beach, FL 33060	Email: mvondermeulen@keithteam.com

Note: Proof of Agent Authorization by Petitioners required.

PROPERTY INFORMATION

Vacation Requested: (brief description) 20' Utility Easement lying across portion of track K.

Section: 4	Township: 49 S	Range: 41 E
Approximate Street Address: 7801 NW 80th Ave, Tamarac, FL 33321		
Location: <input checked="" type="checkbox"/> Municipality	<input type="checkbox"/> Unincorporated Broward County	
Folio Number(s): 49104260021, 49104260020		
Plat: LAND SEC. 4 GOLF COURSE PLAT(PB 88 PG 20 B.C.R.)		
Surveyor/Mapper: Keith and Associates/A.M Lazowick		
Legal Description Attached: <input checked="" type="checkbox"/> Full <input type="checkbox"/> Short	Zoning: S-1	Land Use: COMM REC
Reason for Vacation (be specific): Existing Utility Easement is in conflict with the proposed clubhouse/ Golf cart barn		
First Application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, previous Application No:		

NOTE: Please type/print clearly. Application must be complete and accurate for acceptance.

ADDITIONAL PETITIONER INFORMATION

Petitioner 2:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 3:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 4:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 5:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 6:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 7:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

ADDITIONAL PETITIONER INFORMATION

Petitioner 8:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:

The undersigned Petitioner(s) has fully reviewed the Instructions concerning the Application for Vacation and Abandonment and understands that the Application must be complete and accurate prior to Broward County acceptance and review. The undersigned hereby petitions the Broward County Board of County Commissioners to vacate and abandon the property described herein. By signing as Petitioner(s), the undersigned certifies authenticity of ownership and, when applicable, authorizes the Agent to be its representative in this Application to Vacate and Abandon process.

PETITIONER/OWNER(S)

6/5/17 WOODMONT COUNTRY CLUB, INC.
Date Petitioner
[Signature]
Witness
[Signature]
Witness

MARK SCHMIDT
[Signature]
By (signature)
MARK L. SCHMIDT, PRESIDENT
(print signer's name)

Date Petitioner

Witness

Witness

(print name)
By _____
(signature)

(print signer's name)

PETITIONER ACKNOWLEDGMENT (By Business or Government Entity)

State FLORIDA
County BROWARD

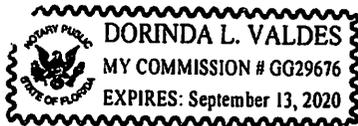
I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments,

MARK SCHMIDT (name)
as PRESIDENT (title)
of WOODMONT COUNTRY CLUB, INC. (name of entity),
a FLORIDA CORPORATION (type of corporation/partnership/government),

, on behalf of the business or government entity, who being first duly sworn by me this day, deposes and states that s/he is authorized on behalf of the business or government entity as Petitioner(s) in the foregoing Application for Vacation and Abandonment.

The foregoing instrument was acknowledged before me this 5TH day of JUNE
2017, by MARK L. SCHMIDT
who is personally known to me or has produced _____
as identification.

NOTARY
(SEAL)



Dorinda L. Valdes
Print Name: DORINDA L. VALDES

Notary Public in and for the County and State last aforesaid.

My Commission Expires: 9/13/2020

Serial No., if any: _____

AFFIDAVIT TO AUTHORIZE PETITIONER(S) AGENT

I/We, WOODMONT COUNTRY CLUB, INC.

_____ , the property owner(s)
of property to be vacated in the subject Application for Vacation and Abandonment, 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:
2. That I/we do hereby appoint the following Agent to act on my/our behalf in the processing of the subject
Application for Vacation and Abandonment to Broward County Board of Commissioners:

Name: KEITH & ASSOCIATES, INC. _____

Address: 301 E. ATLANTIC BLVD. _____

City, State Zip: POMPANO BEACH, FL33060 _____

Telephone: 954-788-3400 _____

Contact Person: MICHAEL VONDER MEULEN, AICP _____

WOODMONT COUNTRY CLUB, INC.

Name of Petitioner/Owner(s)

By [Signature]

(signature)

MARK SCHMIDT, PRESIDENT

(print name)

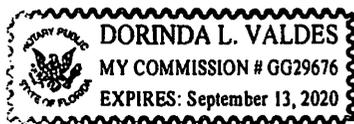
5th day of JUNE, 20 17

State FLORIDA

County BROWARD

The foregoing instrument was acknowledged before me this 5th day of JUNE
2017, by MARK L. SCHMIDT
who is personally known to me or has produced _____
as identification.

NOTARY
(SEAL)



[Signature]
Print Name: DORINDA L. VALDES

Notary Public in and for the County and State last aforesaid.

My Commission Expires: 9/13/2020

Serial No., if any: _____