



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: 12-11-2024

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

From: Urban Planning Division

Subject: Vacation Petition No.: 2024-V-07

Petitioner(s): North Broward Hospital District

Agent for Petitioner(s): Lochrie & Chakas, P.A.

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: 11/07/2024

File Fee (made payable to **Broward County Board of County Commissioners** and deposited)

Petitioner Notice of Intent Dates Published: 10/17/2024 and 10/24/2024

Certificate of Real Estate Taxes Paid [Revenue Collection Division] Date: 07/16/2024

Property Location Municipality of City of Sunrise Municipal Service District

Certified Copy of Municipal Resolution No: 24-35 Date(s): 03/12/2024

Sketch and Legal Description by: John F. Pulice

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: Kelsie Elner Date: 11/04/2024

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: Jennifer Brown Digitally signed by Jennifer Brown
Date: 2024.12.23 15:22:20 -05'00'

Print Name: _____ Date: _____



Application Number 065-MP-83

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 Broward Health - Sunrise FSED			
Plat/Site Number the Ben Ash Plat / 065-MP-83		Plat Book - Page (if recorded) Plat Book 124, Page 15	
Owner/Applicant/Petitioner Name North Broward Hospital District d/b/a Broward Health			
Address 1800 NW 49th Street		City Fort Lauderdale	State FL
Phone (954) 473-7450		Email DJClark@broward.org	
Agent for Owner/Applicant/Petitioner Lochrie & Chakas, P.A.		Contact Person Nectaria M. Chakas, Esq. / Robert B. Lochrie III, Esq.	
Address 699 N. Federal Highway		City Fort Lauderdale	State FL
Phone (954) 779-1119		Email NChakas@lochrielaw.com / RLochrie@lochrielaw.com	
Folio(s) 494120040092			
Location North side of W. Oakland Park Blvd. at/between/and NW 94th Avenue and/of NW 90th Terrace <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).

- 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?	<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 Urban Planning Division?	Project Number	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Don't Know
Project Name		<input type="checkbox"/> N/A	<input checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> Yes <input 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 The Ben Ash Plat	Project Number Not Stated
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.	
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) Commerce	Land Use Plan Designation(s) Commerce
Zoning District(s) B-3	Zoning District(s) B-3

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 <u>will</u> 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
	-	Commercial	18,041 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.

Victoria Chavez _____ Date 10/31/2024 _____
Owner/Agent Signature

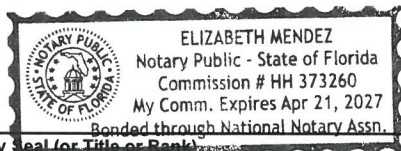
NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of physical presence | online notarization, this 31 day of October, 2024, who is personally known to me | has produced NA as identification.

Elizabeth Mendez _____
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) _____

For Office Use Only

Application Type
Vacation Application

Application Date 11/05/2024	Acceptance Date 11/07/2024	Fee \$1,200
Comments Due 12/06/2024	Report Due N/A	CC Meeting Date TBD

Adjacent City or Cities
N/A

Plats Surveys Site Plans Landscaping Plans Lighting Plans
 City Letter Agreements

Other: **Narrative, Legal and Sketch**

Distribute To

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

Other:

Received By
Diego Munoz



Application Number 065-MP-83

AFFIDAVIT TO AUTHORIZE PETITIONER'S AGENT

I/We, David J. Clark of North Broward Hospital District, 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:

494120040092

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: Nectaria M. Chakas, Esq.
Address: 699 N. Federal Highway, Suite 400
City, State, Zip: Fort Lauderdale, FL 33304
Telephone: 954-779-1123
Contact Person: _____

David J. Clark

11/08/2024

[Signature]

Name of Owner/Petitioner

Date

Signature of Owner/Petitioner (requires notarization)

I, Nectaria M. Chakas, Esq., hereby accept the appointment as Agent to the above listed owner/petitioner.

Nectaria M. Chakas, Esq.
Name of Agent

11/12/2024
Date

[Signature]
Signature of Agent

NOTARY PUBLIC

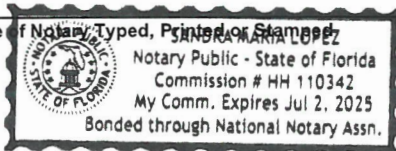
**STATE OF FLORIDA
COUNTY OF BROWARD**

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

physical presence | online notarization, this 8th day of November, 2024,
by David J. Clark, Sr. VP of Operations, of North Broward Hospital District, on behalf of
the District _____.

He/she is personally known to me | has produced N/A as identification.

Name of Notary, Typed, Printed Name



Signature of Notary Public - State of Florida

[Signature]

Notary Seal (or Title or Rank)

Serial Number (if applicable)



Application Number 065-MP-83

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.

D.J. Clark

Agent Signature for Business/Government Entity

11/08/2024

Date

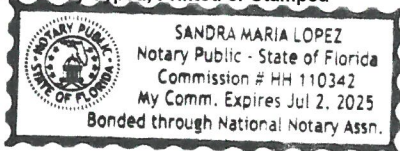
NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of physical presence | online notarization, this 8th day of November, 2024, by David Clark, the Sr. VP of Operations for North Broward Hospital District, on behalf of North Broward Hospital District, a special taxing district of the State of Florida.

He/she is personally known to me | has produced N/A as identification.

Name of Notary Typed, Printed or Stamped



Notary Seal (or Title or Rank)

Signature of Notary Public - State of Florida

[Handwritten Signature]

Serial Number (if applicable)

N/A

November 7, 2024

Josie P. Sesodia AICP, Director
Urban Planning Division
1 N. University Drive, Box 102
Plantation, FL 33324

RE: General Narrative – Vacation of 12-foot-wide Drainage Easement Dedicated by the Ben Ash Plat (065-MP-83) recorded in Plat Book 124, Page 15 – 9001 W. Oakland Park Boulevard, Sunrise, Florida 33351 (“Property”)

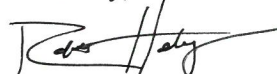
Dear Ms. Sesodia:

North Broward Hospital District, d/b/a Broward Health, is seeking to vacate a 12-foot-wide platted drainage easement on the Property (“Easement”). The Easement was originally dedicated through the Ben Ash Plat, which was recorded in 1985.

The City of Sunrise has approved the Applicant’s site plan for the Broward Health-Sunrise Freestanding Emergency Department (“Project”) on the Property. On March 12, 2024, the City of Sunrise adopted Resolution No. 24-35 and formally vacated its interest in the Easement. The Resolution was recorded under Instrument #119517151.

The vacation of easement application and supporting documents are being submitted concurrently with this narrative. We appreciate your attention to this matter and look forward to your review and approval. Should you require any further information or clarification, please do not hesitate to contact us.

Sincerely,


Robert J. Hely, Esq.