



Application Number 005-MP-26

Public Works and Environmental Services Department
HOUSING AND URBAN PLANNING DIVISION
 1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-6634 F: 954-357-6521 · Broward.org/Planning

Platting & Development Application

Project Information			
Plat Name RESIDENCES AT FOXCROFT COVE			
Plat Number		Plat/Agreement Book - Page (if recorded)	
Owner(s)/Petitioner(s) Name Arbor Ridge Housing Partners, LP			
Address 800 North Point Parkway, Suite 125		City Alpharetta	State GA
		Zip 30005	
Phone (561) 756-0329		Email rblock@nurock.com	
Agent for Owner/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	
BCPA Folio Number(s) 514129010091			
General Location South side of Foxcroft Road at/between/and SW 89th Avenue and/of SW 101st Avenue <i>north side/corner north street name street name / side/corner street name</i>			

Type of Application

Please check the applicable application for the request. Each application type has a checklist indicating the documentation requirements for the pre-application meeting and formal submittal. This application should be submitted to the Housing and Urban Planning Division- Platting Section for review and acceptance.

- New Plat**
- Plat Note Amendment**
- Tri-Party Agreement – Building Permit Prior to Plat Recording**
- Lien Release / Standard Agreements**
- Vacation**
 - 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)**

Application Information				
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 Housing and 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 proposed under the County Land Use Plan?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Don't Know
Is this an Affordable Housing project?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the Affordable Housing Certification Number:	2024-002	
Is this a Live Local Act project?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, provide correspondence from the municipality that this project meets the Live Local Act requirements pursuant to Section 125.01055, F.S.		

Replat Information (for new plats only)	
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"/> N/A	
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? If yes, please answer the following questions. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Number and type of units approved in the underlying plat.	
Number and type of units proposed to be deleted by this replat.	

School Concurrency (for residential applications only)	
Does this application contain any residential units?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If the application is a replat, is the type, number, or bedroom restriction of the residential units changing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A
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 <input type="checkbox"/> N/A
Has this project been issued a School Board Impact Fee Waiver?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If the answer is "Yes" to any of the questions above provide a School Capacity Availability Determination (SCAD) Letter from the Broward County School Board.	

Land Use	
EXISTING	PROPOSED
Land Use Plan Designation(s) Irregular Medium High Residential	Land Use Plan Designation(s) SAME

Existing Use
A credit against impact fees may be given for the site's current or previous use.

Are there any existing structures on the site? Yes No

Land Use Type	Gross Building square foot 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
			YES NO	YES NO	HAS WILL NO

Gross non-residential square footage includes the area of each floor level, measured from principal outside faces of exterior walls, including, but not limited to, corridors, mezzanines, floor surfaces with clear standing head room regardless of their use, areas totaling more than one hundred (100) square feet which are not enclosed but roofed.

Proposed Use			
RESIDENTIAL USE		NON-RESIDENTIAL USE	
Land Use Type	Number of Dwelling Units or Rooms for Hotel use	Land Use Type	Gross Floor Area
MID-RISE	84		

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.

Christian Dumay _____ Date 1-30-26

Owner/Agent Signature _____ Date

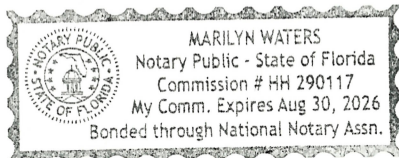
NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of physical presence | online notarization, this 30 day of January, 2026, who is personally known to me | has produced _____ as identification.

Marilyn Waters
Name of Notary Typed, Printed or Stamped

Marilyn Waters
Signature of Notary Public – State of Florida



Notary Seal (or Title or Rank)

Serial Number (if applicable)

For Office Use Only

Application Type

New Plat

Application Submittal Date 2/5/2026	Acceptance Date 2/12/2026	Fee \$2,400
Comments Due 3/4/2026	Report Due 3/16/2026	CC Meeting Date TBD

Adjacent Municipality
N/A

- Plat
 Survey
 Narrative
 Title Work
 Agent Affidavit
 Municipal Approval
 Pre-Application Conference Receipt

Other: BCPA Receipt

Distribute To
 Full Review
 Administrative Review

Accepted By
Christian Dumay