④

Board of County Commissioners, Broward County, Florida
Resilient Environment Department
Urban Planning Division

Project Update Sheet

Plat/Site Plan Number 025-MP-24

INSTRUCTIONS

Use this update form in lieu of filling out a new plat/site plan application form whenever a project goes from one review to another or whenever new information is submitted. Complete the applicable sections of this form *only if the information has changed from the previous submittal.* If you do not have a copy of your previous application forms, obtain a copy from this office. Any section left blank indicates that the information on the original (previous) application has not changed. Supplemental documentation requirements are listed on the reverse side of the "Project Questionnaire" form, page 3, available from this office. Please type this application or print legibly in **black ink.**

PROJECT REVISIONS

Plat/Site Plan Name _____

Owner's Name 849 S S-R 7, LLC Phone _____

Address _____ City _____ State _____ Zip Code _____

Owner's E-mail Address _____ Fax # _____

Agent _____ Phone _____

Contact Person _____

Address _____ City _____ State _____ Zip Code _____

Agent's E-mail Address _____ Fax # _____

EXISTING	**PROPOSED**
Land use plan designation(s) _____	Land use plan designation(s) _____
Zoning District(s) _____	Zoning District(s) _____

A credit against impact fees may be given for the site's present or previous use if there are existing buildings on the property and/or if buildings were demolished within eighteen (18) months of this application. To receive a credit, complete the following table (attach an additional sheet if necessary). (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 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.

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?

*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.

Please specify the proposed use in accordance with the land use categories listed on the reverse side of the "Project Characteristics form, page 2, available from this office. Please Note: Residential uses must be expressed based upon DWELLING UNIT TYPES listed on the reverse side of page 2. COMMERCIAL, OFFICE, and CHURCH USES must be expressed in terms of gross building square footage. If there are any unique factors which may affect traffic generation, attach a separate sheet and describe fully.

Has flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?
☐ Yes ☐ No ☐ Don't Know
If yes, consult Policy 13.01.10 of the Land Use Plan. A compatibility determination may be required.

RESIDENTIAL UNITS		**NON-RESIDENTIAL UNITS**	
Type of Unit	Number of Units	Land Use	Net Acreage or Gross Floor Area

SCHOOL CONCURRENCY (Residential Submissions Only)

Does the change to the application generate less than one (1) student? ☐ Yes ☐ No
Is this application exempt or vested pursuant to criteria in the Land Development Code? ☐ Yes ☐ No

If the answers to both questions are "No," please see reverse side of Page 3, Required Documentation section of the Plat/Site Plan application for submittal requirements.

Is this application subject to an approved Declaration of Restrictive Covenant or tri-party agreement? ☐ Yes ☐ No

If "Yes," please see reverse side of Page 3, Required Documentation section of the Plat/Site Plan application for submittal requirements.

FOR PLANNING AND DEVELOPMENT MANAGEMENT DIVISION USE ONLY

Application Type _____ Time _____ Application Date _____

Acceptance Date _____ Fee _____ Comments Due _____

Report Due _____ Adjacent City _____

☐ Plats ☐ Surveys ☐ Site Plans ☐ Landscaping Plans ☐ Lighting Plans

☐ Other (Describe) _____ Received By _____

Comments _____

Questionnaire Changes

Please review all questions on the "Project Questionnaire" form, Page 3, and indicate any revisions.	
Question Number	Revised information or Attachments Supplied

Comments and Additional Information

The purpose if this Project Update is to document the applicant's change of name. Legal Representative of property owner remains, same as address, phone number, etc. Please refer to attached QCD. Thank you.

Owner/Agent Certification

State of Florida

County of Broward

This is to certify that I am the owner/agent of the property described in this application and that all changes to the original application and supplemental documents supplied herein are true and correct to the best of my knowledge. If no changes are indicated on this update sheet or in the attached supplemental documentation, then this certifies that the information supplied on the original application 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.

Signature of owner/agent _____

Sworn and subscribed to before me this 16 day of September, 2025

by Elizabeth Tsouroukdissian ☑ He/she is personally known to me or

☐ Has presented _____ as identification.

Signature of Notary Public _____

Type or Print Name Marilyn Waters

MARILYN WATERS
Notary Public - State of Florida
Commission # HH 290117
My Comm. Expires Aug 30, 2026
Bonded through National Notary Assn.

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

Application Number 025-MP-24

Development and Environmental Review Online Application

Project Information

Plat/Site Plan Name: MAZEL TOV ESTATE			
Plat/Site Number:	Plat Book - Page (if recorded):		
Owner/Applicant/Petitioner Name: 100 Mazel Tov Estate, LLC.			
Address: 3661 W. Forge Road	City: Davie	State: FL	Zip: 33328
Phone: (954) 761-3636	Email: rafeiner@coker-feiner.com		
Agent for Owner/Applicant/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		
Folio(s): 504112000030			

Location: West (*north side/corner north*) side of S. State Road 7 (*street name*) at/between/and SW 8th Street (*street name / side/corner*) and/of SW 9th Street (*street name*)

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?	☐ Yes	☒ No	☐ Don't Know
This is a resubmittal of:	☐ Entire Project	☐ Portion of Project	☒ N/A
What was the project number assigned by the Urban Planning Division?	Project Number	☒ N/A	☐ Don't Know
Project Name		☒ N/A	☐ Don't Know
Are the boundaries of the project exactly the same as the previously submitted project?	☐ Yes	☐ No	☐ Don't Know
Has the flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?	☐ Yes	☒ No	☐ 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? ☐ Yes ☒ No ☐ 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? ☐ Yes ☐ No ☐ 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.)	☒ Yes	☐ No
If the application is a replat, is the type, number, or bedroom restriction of the residential units changing?	☐ Yes	☐ No
If the application is a replat, are there any new or additional residential units being added to the replat's note restriction?	☐ Yes	☐ No
Is this application subject to an approved Declaration of Restrictive Covenants or Tri-Party Agreement entered into with the Broward County School Board?	☐ Yes	☒ 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) Local Activity Center	Land Use Plan Designation(s) SAME
Zoning District(s) B-AC (Gateway-Artisan Commerce)	Zoning District(s) SAME

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 STUCTURE(S)		
			Remain the Same?	Change Use?	**Has** been or **will** be Demolished?
VACANT			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 id 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**
Garden Apartments	18		

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

10-15-24
Date

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☑ physical presence | ☐ online notarization, this 15 day of October, 2024, who ☑ is personally known to me | ☐ has produced _____ as identification.

Marilyn Waters
Name of Notary Typed, Printed or Stamped

Signature of Notary Public – State of Florida

MARILYN WATERS
Notary Public - State of Florida
Commission # HH 290117
My Comm. Expires Aug 30, 2026
Bonded through National Notary Assn.

Notary Seal (or Title or Rank)

Serial Number (if applicable)

For Office Use Only

Application Type: Plat

Application Date	Acceptance Date	Fee
10/17/2024	10/23/2024	$4,680.00
Comments Due	**Report Due**	**CC Meeting Date**
11/22/2024	12/02/24	TBD

Adjacent City or Cities

☑ Plats ☑ Surveys ☑ Site Plans ☐ Landscaping Plans ☐ Lighting Plans
☐ City Letter ☐ Agreements

☐ Other:

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