RECEIVED
MAY 06 2022
Urban Planning Division

Application Number 015-MP-22

BROWARD COUNTY FLORIDA
Environmental Protection and Growth Management Department
PLANNING AND DEVELOPMENT MANAGEMENT DIVISION
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: Pines and 72nd			
Plat/Site Number	Plat Book - Page (if recorded)		
Owner/Applicant/Petitioner Name: Trinity Lutheran Church, Inc.			
Address: 7150 Pines Blvd	City: Pembroke Pines	State: FL	Zip: 33024
Phone: 954-297-1325	Email: fitlisa71199@gmail.com		
Agent for Owner/Applicant/Petitioner: Dunay, Miskel & Backman, LLP	Contact Person: Dwayne L. Dickerson, Esq.		
Address: 14 SE 4th St. Suite 36	City: Boca Raton	State: FL	Zip: 33432
Phone: 561-405-3336	Email: ddickerson@dmbblaw.com		
Folio(s): 5141 14 01 0041			

Location: SE Corner (*north side/corner north*) side of Pines Blvd (*street name*) at/between/and SW 72nd Ave (*street name / side/corner*) and/of _____ (*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)

BROWARD COUNTY FLORIDA

Application Number _____

Environmental Protection and Growth Management Department
PLANNING AND DEVELOPMENT MANAGEMENT DIVISION
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: Pines and 72nd			
Plat/Site Number:	Plat Book - Page (if recorded):		
Owner/Applicant/Petitioner Name: BP-Pines, LLC			
Address: 20411 W. 12 Mile	City: Southfield	State: MI	Zip: 48066
Phone: 248-797-0003	Email: patrick@bluepeninsula.net		
Agent for Owner/Applicant/Petitioner: Dunay, Miskel & Backman, LLP	Contact Person: Dwayne L. Dickerson, Esq.		
Address: 14 SE 4th St. Suite 36	City: Boca Raton	State: FL	Zip: 33432
Phone: 561-405-3336	Email: ddickerson@dmbblaw.com		
Folio(s): 5141 14 01 0041			

Location: SE Corner (north side/corner north) side of Pines Blvd (street name) at/between/and SW 72nd Ave (street name / side/corner) and/of _____ (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 Planning and Development 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) Community Facilities	Land Use Plan Designation(s) Community Facilities/Gas Station & Convenience
Zoning District(s) A	Zoning District(s) A and 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 STUCTURE(S)		
			Remain the Same?	Change Use?	Has been or will be Demolished?
Community Facilities	8930	Current	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
		Church	12,500
		Convenience Store w/16 fueling positions	16 fueling positions

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.

Lisa montalchi
Owner/Agent Signature

9/9/21
Date

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☑ physical presence | ☐ online notarization, this 9 day of September, 20 21, who ☐ is personally known to me | ☑ has produced US Passport as identification.

Carl C Walker
Name of Notary Typed, Printed or Stamped

Signature of Notary Public – State of Florida

CARL C WALKER
Notary Public - State of Florida
Commission# GG 202712
My Comm. Expires May 20, 2022
Bonded through National Notary Assn.

Notary Seal (or Title or Rank)

GG202712
Serial Number (If applicable)

For Office Use Only

Application Type: Muni Plat

Application Date	Acceptance Date	Fee
5/06/2022	5/26/2022	$4,780
Comments Due	**Report Due**	**CC Meeting Date**
6/15/2022	6/27/2022	TBA

Adjacent City or Cities: Hollywood

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

☒ Other: FDOT Letter, title work, BCRA receipt

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

☐ Other: None

Received By: Christian Damay

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

October 25, 2023
Date

NOTARY PUBLIC

STATE OF ~~FLORIDA~~ Michigan
COUNTY OF ~~BROWARD~~ Oakland

The foregoing instrument was acknowledged before me by means of ☒ physical presence | ☐ online notarization, this 25th day of October, 20____, who ☒ is personally known to me | ☐ has produced _____ as identification.

Deborah Ann Montpas
Name of Notary Typed, Printed or Stamped

DEBORAH ANN MONTPAS
NOTARY PUBLIC
State of Michigan
My Commission Expires
February 25, 2028

Deborah Ann Montpas
Signature of Notary Public – State of ~~Florida~~ Michigan

Notary Seal (or Title or Rank)

Serial Number (If applicable)

For Office Use Only

Application Type		
Application Date	Acceptance Date	Fee
Comments Due	Report Due	CC Meeting Date
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