

Application Number 017-MP-24

URBAN PLANNING 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

Plat/Site Plan Name						
MG SUNRISE						
Plat/Site Number		Plat Book - Page (if recorded)				
Owner/Applicant/Petitioner Name						
MG Sunrise, LLC.						
Address		City	State	Zip		
3301 NE 1st Avenue, Suite 109		Miami	FL	33137		
Phone	Email					
(305) 766-1699	jon@mi	dtowngp.com				
Agent for Owner/Applicant/Petitioner		Contact Person				
PULICE LAND SURVEYORS, IN	NC.	Elizabeth Tsourou				
Address		City	State	Zip		
5381 Nob Hill Road		Sunrise	FL	33351		
Phone (05.4) 570, 4777	Email	h ath Gardia landa manana asaa				
(954) 572-1777 Folio(s)	elizabet	h@pulicelandsurveyors	S.COIII			
494119010030 -SUNRISE						
Location						
Location						
Southeastside of Oakland Park Blvd	_at/between/and	Nob Hill Rd	d/of			
Southeast side of Oakland Park Blvd north side/corner north street name	_at/between/and	Nob Hill Rd street name / side/corner	d/ofstreet i	name		
Southeast side of Oakland Park Blvd on orth side/corner north street name	_at/between/and	Nob Hill Rd and street name / side/corner	d/ofstreet i	name		
north side/corner north street name		street name / side/corner	d/ofstreet i	name		
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Application Status						
Has this project been previously submitted?	□ Yes	⊠ No)		□ Don't	Know
This is a resubmittal of: □ Entire Project	☐ Portio	n 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	ПΝ	0		□ Don't	Know
Has the flexibility been allocated or is flexibility proposed to be allocated under the County Land Use Plan?	□ Yes	⊠N	0		□ Don't	Know
If yes, consult Policy 13.01.10 of the Land Use	Plan. A comp	atibility dete	rminatio	n may be	required	
Davidat Otatura						
Replat Status						
Is this plat a replat of a plat approved and/or recorded	d after March 2	20, 1979?	☐ Yes	⊠ No	□ Don'	t Know
If YES, please answ	er the following	g questions				
Project Name of underlying approved and/or recorded plat			Project Nu	ımber		
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, Re	plats and S	ite Plan S	ubmiss	sions)		
Does this application contain any residential units? (If	"No," skip the	remaining	question	ıs.)	□ Yes	⊠ No
If the application is a replat, is the type, number, or be changing?	edroom restric	tion of the r	esidentia	al units	□ Yes	⊠ No
If the application is a replat, are there any new or ad the replat's note restriction?	lditional reside	ential units t	peing ad	ded to	□ Yes	⊠ No
Is this application subject to an approved Declaration Agreement entered into with the Broward County Sch		ve Covenar	nts or Tr	i-Party	□ 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)	Land Use Plan Designation(s)
Commercial	SAME
Zoning District(s)	Zoning District(s)
B-2 (Community Business District)	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

			EXISTING STUCTURE(S)		
Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	Remain the Same?	Change Use?	Has been or will be Demolished?
Bank with drive-thru	6,635 sq.ft.	2023	YES N	YES 🂢	HAS V)X(L 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	
		Bank with drive-thru	2,700 sq.ft.	

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	~~ K L	6 - 17- Date	24			
	NOTAR	Y PUBLIC				
STATE OF FLORIDA COUNTY OF BROWAR	D					
The foregoing instrument was	acknowledged before me	by means of ☑ physical prese	nce online notarization,			
this 17 day of Ju	ne , 20 2	✓_, who □ is personally know	n to me □ has produced			
	as identification.					
Marilyn Waters Name of Notary Typed, Printed or Stamped MARILYN WATERS Notary Public - State of Florida Commission # HH 290117						
Notary Seal (or Title or Rank) My Comm. Expires Aug 30, 2026 Bonded through National Notary Assn. Serial Number (if applicable)						
For Office Use Only						
Application Type NEW STANDARD PLA	ΛT					
Application Date	Acceptance Date	Fee # 700				
6/17/2024	6/21/2024	\$4,780				
7/22/2024	Report Due 8/1/2024	CC Meeting Date TBD				
Adjacent City or Cities N/A		1.55=				
☑ Plats ☑ Survey	s 💆 Site Plans	☐ Landscaping Plans	☐ Lighting Plans			
□ City Letter □ Agreer	nents					
Ŏ Other: TITLE WORK, MUNICIPAL RECEIPT						
Distribute To Distribute To	Planning Council	☐ School Board	☐ Land Use & Permitting			
☐ Health Department	☐ Zoning Code Servic	es (BMSD only)	☐ Administrative Review			
□ Other:						
Received By J.LU-CHONG						