

Application	Number	

1 N. University Drive, Box 102A · Plantation, FL 33324 · T: 954-357-6634 · F: 954-357-6521 · Broward.org/Planning

Development and Environmental Review Online Application

Project Information				
Plat/Site Plan Name				
Town of Davie Boys and Girls Club	Plat			
Plat/Site Number		Plat Book - Page (if recorded)		
065-MP-99		169 - 80		
Owner/Applicant/Petitioner Name				
SCHOOL BOARD OF BROWARD	COUNTY A	TTN:FACILITY MANAC	SEMENT	
Address		City	State	Zip
1220 SW 130th Ave	,	Davie	FL	33301
Phone	Email			
N/A	N/A			
Agent for Owner/Applicant/Petitioner		Contact Person		
5 Architecture		Matthew R. Forget		
Address		City	State	Zip
33 SE 4th Street, Suite 100		Boca Raton	FL	33432
Phone	Email	.h:tt		
561-835-5515 Folio(s)	matt@sart	chitecture.com		
504011280010				
Location				
South Side side of Access Road a	t/between/and We	est side and	SW 130th A	Ave
north side/corner north street name		street name / side/corner	stree	t name
Type of Application (this form re-	quired for a	Il applications)		
	-			
Please check all that apply (use attached	instructions	for this form).		
☐ Plat (fill out/PRINT Questionnaire Fo	orm, Plat Check	klist)		
☐ Site Plan (fill out/PRINT Questionna	ire Form, Site I	Plan Checklist)		
☑ Note Amendment (fill out/PRINT Que	estionnaire Foi	rm, Note Amendment Check	list)	
☐ Vacation (fill out/PRINT Vacation Co	ontinuation For	m, Vacation Checklist, use V	/acation Instruct	tions)
☐ Vacating Plats, o	r any Portion T	hereof (BCCO 5-205)		
☐ Abandoning Stre	ets, Alleyways	, Roads or Other Places Use	ed for Travel (BC	AC 27.29)
☐ Releasing Public	Easements an	d Private Platted Easements	or Interests (BC	CAC 27.30)
☐ Vacation (Notary Continuation Form	m Affidavit requi	red, 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	☐ Portio	on 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? If yes, consult Policy 13.01.10 of the Land Use	□ Yes	□ No	nation may h		't Know
in yes, consult oney 10.01.10 of the Land 030	i idii. A coiii	patibility determin	nation may b	o required	
Replat Status					
Is this plat a replat of a plat approved and/or recorded If YES, please answ			Yes ⊠ No	o 🗆 Dor	n't Know
Project Name of underlying approved and/or recorded plat	er the follow		ject Number		
Is the underlying plat all or partially residential? If YES, please answ Number and type of units approved in the underlying plat.	er the follow		Yes ⊠ No	o 🗆 Dor	ı't Know
Number and type of units proposed to be deleted by this replat.					
Difference between the total number of units being deleted from the underlyi	ng plat and the nu	mber of units proposed	in this replat.		
School Concurrency (Residential Plats, Re	plats and \$	Site Plan Sub	missions)		
Does this application contain any residential units? (If	"No," skip th	e remaining que	estions.)	□ Yes	⊠ No
If the application is a replat, is the type, number, or be changing?	edroom restr	ction of the resid	dential units	□ Yes	⊠ No
If the application is a replat, are there any new or ad the replat's note restriction?	ditional resid	dential units beir	ng added to	□ Yes	⊠ No
Is this application subject to an approved Declaration Agreement entered into with the Broward County Sch		tive Covenants	or Tri-Party	□ Yes	⊠ No
RESIDENTIAL APPLICATIONS ONLY: Provide a receip Impact Application (PSIA) and fee have been accepted concurrency, exempt from school concurrency (exemptions communities, and projects contained within Development Restrictive Covenant or Tri-Party Agreement.	ot from the S d by the Sch include project	school Board do ool Board for re- ts that generate le	cumenting the sidential projects than one s	ects subject student, ag	t to school e restricted

Land Use and Zoning					
EXISTING	PROPOSED				
Land Use Plan Designation(s)	Land Use Plan Designation(s)				
33	33				
Zoning District(s)	Zoning District(s)				
CF	CF				

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			
Land Use	Gross Building sq. ft.* or Dwelling Units	Date Last Occupied	Remain the Same?	Change Use?	Has been or will be Demolished?	
Community Center	20388		YXS NO	YES ¾ Ó	HAS WILL N	
			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					
RESID	ENTIAL USES	NON-RESIDENTIAL USES			
Land Use	Number of Units/Rooms	Land Use	Net Acreage or Gross Floor Area		
		Community Center	24000		

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.							
	11-02-2023						
Owner/Agent Signature	Date						
NOTARY PU	BLIC						
NOTARTE	BEIG						
STATE OF FLORIDA COUNTY OF BROWARD							
The foregoing instrument was acknowledged before me by me	eans of \square physical presence \boxtimes online notarization,						
this 2nd day of November , 20 23 , v	who ⊠ is personally known to me □ has produced						
as identification.							
	Sheri M. Galante						
Sheri M. Galante Name of Notary Typed, Printed or Stamped S	Signature of Notary Public – State of Florida						
Notary Public State of Florida Sheri M Galante My Commission HH 078507 Expires 01/15/2025 Notary Seal (or Title or Rank)	Sheri M Galante My Commission HH 078507 Expires 01/18/2025						
For Office Use Only							
Application Type NOTE Amendment							
Application Date Acceptance Date 11/29/23	Fee 2090.00						
Comments Due. Report Due TBD	CC Meeting Date						
Adjacent City or Cities							
NA							
N/A ☐ Plats ☐ Surveys ☐ Site Plans	☐ Landscaping Plans ☐ Lighting Plans						
N/A ☐ Plats ☐ Surveys ☐ Site Plans ☐ City Letter ☐ Agreements	☐ Landscaping Plans ☐ Lighting Plans						
	☐ Landscaping Plans ☐ Lighting Plans						
☐ City Letter ☐ Agreements ☐ Other:	□ Landscaping Plans □ Lighting Plans chool Board □ Land Use & Permitting						
☐ City Letter ☐ Agreements ☐ Other:	chool Board □ Land Use & Permitting						
☐ City Letter ☐ Agreements ☐ Other: Distribute To ☐ Planning Council ☐ S	chool Board □ Land Use & Permitting						



Application	Number	

Development and Environmental Review Online Application Questionnaire Form

Ty	pe	of Application					
] Plat	☐ Site Plan		⊠ Note Amer		
Pı	oje	ct Questionnaire					
Ple	ease	answer the questions ma	arked for the type of applicati	ion checked.			
	1.	Why is this property be	eing platted? Attach an addit	tional sheet(s) if necessa	ary.		
	2.		n existing Development of Re If "Yes", indicate DRI or FQD k and Page Number.			□ Yes	□ No
	DF	RI Name		FQD Name			
	La	atest Ordinance Number		Official Record Book and Pag	e Number		
	3.		o any existing or proposed a s", state the title and subject			☐ Yes	□No
X	4.	Is any portion of this pl	lat currently the subject of a	Land Use Plan Amendm	nent (LUPA)?	☐ Yes	⊠ No
	If '	YES, LUPA Number					
X	5.	Does the note represe	ent a change in TRIPS?	☑ Increase	☐ Decrease	□ No	Change
×	6.	Does the note represe	ent a major change in Land U	Jse?		□ Yes	⊠ No
	7.		vay improvements being requant? If "Yes", attach any she		nt agency or	☐ Yes	□ No
	8.	Does this property or p attach the appropriate	roject have an adjudicated or documentation.	vested rights status? If "	Yes", please	□ Yes	□ No
	9.	If "Yes", please attach	any financial interest in prope a sheet(s) and describe fully	<i>1</i> .		☐ Yes	□ No
	10.		out a State Road? If "Yes" for required letter from Flo			□ Yes	□ No

	11. Has consideration been given to public transportation routes, shelters, or turnouts for the proposed project? If "Yes", please attach sheet(s) and describe fully.	☐ Yes	□ No
	12. Are bikeways and walkways to be provided to connect residential areas to school or recreational sites? If "Yes", attach five (5) drawings showing facilities (if not show on plat).	□ Yes	□ No
	 Is credit being requested for private recreational facilities? If "Yes", attach two (2) sets of plans showing facilities. (APPLIES TO PROJECTS IN THE UNINCORPORATED AREA ONLY.) 	□ Yes	□ No
	14. Has any discussion with the School Board taken place? If "Yes", state the name and title of the person contacted.	☐ Yes	□No
	Name/Title		
	15. If a school site will be reserved or dedicated on the property, is the site delineated on the plat or site plan?	☐ Yes	□ No
	16. Are there any natural features located on the property (e.g. wetlands, dunes, areas of native tree canopy wildlife, habitats, etc.)? If "Yes", attach a sheet(s) and describe fully. For information, contact Aquatic and Wetland Resources Section, Environ. Licensing & Bldg. Permitting (ELBP) Division.	□ Yes	□No
	17. Does the property contain any portion of lands identified as "Natural Resource Areas?" If "Yes" see Supplemental Documentation Requirement No. 8. For locations, contact Aquatic and Wetland Resources Section (ELBP Division).	☐ Yes	□ No
	18. Does the property contain any portion of lands identified as an "Urban Wilderness Area" or "Vegetative Resource Category Local Area of Particular Concern?" If "Yes", please see Supplemental Documentation Requirement No. 9. For locations, contact Aquatic and Wetland Resources Section (ELBP Division).	□ Yes	□No
	19. Does the property contain any portion of lands identified as a "Cultural Resource Category Local Area of Particular Concern" which include archaeological sites and/or historic sites and structures? If "Yes", for archaeological sites, see Supplemental Documentation Requirement No. 10. For historic locations, contact the Broward County Historic Preservation Officer.	□ Yes	□ No
	20. Will any dredging or major filling operation be necessary, or is a waterway involved in the proposed project? If "Yes", permits may be required from Broward County. Please contact Broward County Aquatic and Wetland Resources Section (ELBP Division).	☐ Yes	□ No
X	21. Is the project to be served by an approved potable water system? If "Yes", state the name of facility and facility address.	Yes	□ No
	Facility Name CITY OF SUNRISE WATER AND SEWER TREATMENT PLANT		
	Address 14150 NW 8TH STREET, SUNRISE, FL 33325, USA		7
X	22. Is this project to utilize on-site wells for its potable water? If "Yes", see Supplemental Documentation Requirement No. 13 for required letter.	□ Yes	⊠ No
\times	23. Is this project to be served by an approved wastewater (sewage) treatment plant? If "Yes", state the name of facility and facility address.	Yes	□No
	Facility Name CITY OF SUNRISE WATER AND SEWER TREATMENT PLANT		
	Address 14150 NW 8TH STREET, SUNRISE, FL 33325, USA		

X	24. Will septic tanks serve this project? If "Yes", see Supplemental Documentation Requirement No. 12 for required letter.	☐ Yes	⊠ No		
	25. Have provisions been made for the collection of solid waste for this project? If "Yes", state the name of the collector.	☐ Yes	□ No		
	Solid Waste Collector				
	26. Has any contact been made with FPL and AT&T regarding service availability and easement requirements? If "Yes", state name and title of the person contacted.				
	FPL - Name/Title				
	AT&T - Name/Title				
X	27. Estimate or state the total number of on-site parking spaces to be provided.	Spaces 18			
X	28. If applicable, state the seating capacity of any proposed restaurant or public assembly facility, including day care centers or schools, or places of worship.	Seating Not Ap	plicable		



11.02.2023

Josie P. Sesodia, AICP, Director

Urban Planning Division

954.357.6602

Re: Plat Note Amendment on the Town of Davie Boys and Girls Club - Plat No. 065-MP-99

Dear Josie P. Sesodia,

Town of Davie Boys and Girls Club's address is 1220 SW 130th Ave, Davie, FL 33325 and it is located on the south side of Flamingo Elementary between SW 13th Street and SW 130th Avenue in the Town of Davie. The plat in question (Town of Davie Boys and Girls Club - 065-MP-99) was approved by the Broward County Board of County Commission in December 2000. The property was previously developed as a 20,388 square feet Community Center building. The Applicant is proposing to construct an addition of approximately 1,800 square feet. We are now requesting a note to be amended as indicated below:

FROM:

"This plat is restricted to 20,388 square feet of Community Center use on Tract A."

TO:

"This plat is restricted to 24,000 square feet of Community Center use on Tract A."

Thank you in advance for your consideration of this request. Please contact the undersigned should you have any questions.

Sincerely,

MATT FORGET Architect I Principal