

Vicinity Map

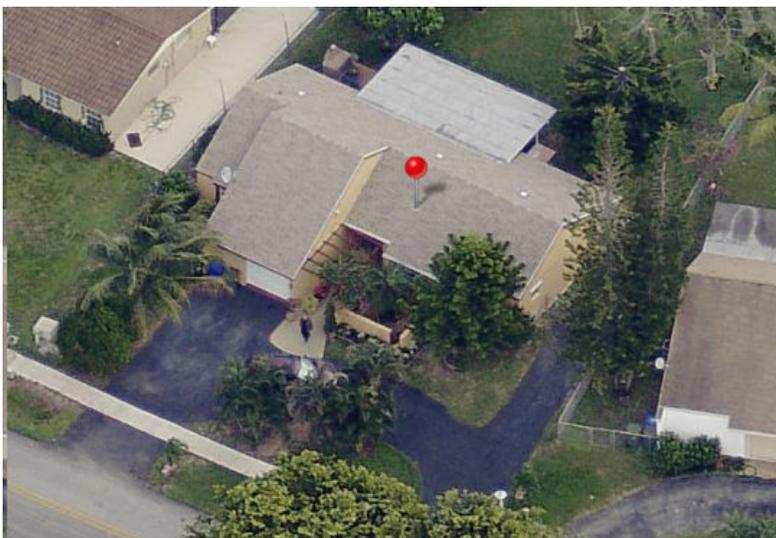
City of Pembroke Pines • Planning and Economic Development Department

Zoning Variance
ZV(R) 2017-10-11

Ruben Langoni
1041 NW 96 Terrace
Pembroke Pines, FL 33024



NOT TO SCALE



City of Pembroke Pines Planning and Economic Development Department Unified Development Application

Planning and Economic Development
 Third Floor
 Center Way
 Pembroke Pines, FL 33025
 Phone: (954) 392-2100
<http://www.ppines.com>

Prior to the submission of this application, the applicant must have a pre-application meeting with Planning Division staff to review the proposed project submittal and processing requirements.

Pre Application Meeting Date: 11/28/17

Plans for DRC _____ Planner: Dean

Indicate the type of application you are applying for:

- | | |
|---|--|
| <input type="checkbox"/> Appeal* | <input type="checkbox"/> Sign Plan |
| <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Site Plan* |
| <input type="checkbox"/> Delegation Request | <input type="checkbox"/> Site Plan Amendment* |
| <input type="checkbox"/> DRI* | <input type="checkbox"/> Special Exception* |
| <input type="checkbox"/> DRI Amendment (NOPC)* | <input checked="" type="checkbox"/> Variance (Homeowner Residential) |
| <input type="checkbox"/> Flexibility Allocation | <input type="checkbox"/> Variance (Multifamily, Non-residential)* |
| <input type="checkbox"/> Interpretation* | <input type="checkbox"/> Zoning Change (Map or PUD)* |
| <input type="checkbox"/> Land Use Plan Map Amendment* | <input type="checkbox"/> Zoning Change (Text) |
| <input type="checkbox"/> Miscellaneous | <input type="checkbox"/> Zoning Exception* |
| <input type="checkbox"/> Plat* | <input type="checkbox"/> Deed Restriction |

INSTRUCTIONS:

- All questions must be completed on this application. If not applicable, mark N/A.
- Include all submittal requirements / attachments with this application.
- All applicable fees are due when the application is submitted (Fees adjusted annually).
- Include mailing labels of all property owners within a 500 foot radius of affected site with signed affidavit (Applications types marked with *).
- All plans must be submitted no later than noon on Thursday to be considered for Development Review Committee (DRC) review the following week.
- Adjacent Homeowners Associations need to be noticed after issuance of a project number and a minimum of 30 days before hearing. (Applications types marked with *).
- The applicant is responsible for addressing staff review comments in a timely manner. Any application which remains inactive for over 6 months will be removed from staff review. A new, updated, application will be required with applicable fees.
- Applicants presenting demonstration boards or architectural renderings to the City Commission must have an electronic copy (PDF) of each board submitted to Planning Division no later than the Monday preceding the meeting.

Staff Use Only

Project Planner: Dean Project #: PRJ 20 N/A Application #: EV(R) 2017-10
 Date Submitted: 11/30/17 Posted Signs Required: () Fees: \$ 500.00

SECTION 1-PROJECT INFORMATION:

*Project Name: RUBEN LANGOSI

*Project Address: 1041 NW 96th TERR. - P.P. - 33024

Location / Shopping Center: _____

Acreeage of Property: _____ Building Square Feet: _____

Flexibility Zone: _____ Folio Number(s): _____

Plat Name: _____ Traffic Analysis Zone (TAZ): _____

Legal Description:

Has this project been previously submitted? Yes No

Describe previous applications on property (Approved Variances, Deed Restrictions, etc...) Include previous application numbers and any conditions of approval.

Date	Application	Request	Action	Resolution / Ordinance #	Conditions of Approval

SECTION 2 - APPLICANT / OWNER / AGENT INFORMATION

* Owner's Name: RUBEN LANGONI

* Owner's Address: 1041 NW 96th TERR - P.P. 33024

* Owner's Email Address: rlangoni1@gmail.com

* Owner's Phone: 954-432-7377 * Owner's ^{Cell} ~~Fax~~ 954-854-4582

Agent: _____

Contact Person: _____

Agent's Address: _____

Agent's Email Address: _____

Agent's Phone: _____ Agent's Fax: _____

All staff comments will be sent directly to agent unless otherwise instructed in writing from the owner.

SECTION 3- LAND USE AND ZONING INFORMATION:

EXISTING

PROPOSED

Zoning: _____

Zoning: _____

Land Use / Density: _____

Land Use / Density: _____

Use: _____

Use: _____

Plat Name: _____

Plat Name: _____

Plat Restrictive Note: _____

Plat Restrictive Note: _____

ADJACENT ZONING

ADJACENT LAND USE PLAN

North: _____

North: _____

South: _____

South: _____

East: _____

East: _____

West: _____

West: _____

Ruben Langoni
1041 NW 96th Terrace
Pembroke Pines, FL 33024
(954) 854-4582
Rlangoni1@gmail.com

November 30, 2017

City of Pembroke Pines (Code Enforcement)

10100 Pines Blvd
Pembroke Pines, FL 33026

To whom it may concern:

On November 29th, I was served with a notice regarding a recent enhancement of my property. I had the driveway and walkway on my home changed from asphalt based to stamped concrete. The notice I was served was regarding the lack of permit documentation for the work that was performed.

Please note that it was not my intention to have to work performed without having applied for a permit from the City of Pembroke Pines. The work was performed with the permit due to a short window of availability.

It was my honest intention to have obtained a permit for this work to be completed as I had already made arrangements to apply for the permit the week of November 27th.

I have full understanding and appreciation for the rules and ordinances of the city. As a taxpayer and Pembroke Pines property owner for nearly 20 years, I have always followed to rules/guidelines outlined by the city and I look forward to cooperating with the city to rectify this specific matter.

Sincerely,

Ruben Langoni


SECTION 6 - DESCRIPTION OF PROJECT (attach additional pages if necessary)

Blank lined area for project description.

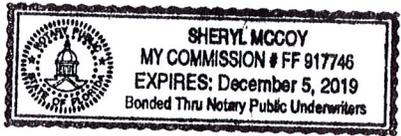
SECTION 7- PROJECT AUTHORIZATION

OWNER CERTIFICATION

This is to certify that I am the owner of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge.

[Signature] 11.30.2017
Signature of Owner Date

Sworn and Subscribed before me this 30th day
of November, 2017



[Signature] 12/05/2019
Fee Paid Signature of Notary Public My Commission Expires

AGENT CERTIFICATION

This is to certify that I am the agent of the property owner described in this application and that all information supplied herein is true and correct to the best of my knowledge.

Signature of Agent Date

Sworn and Subscribed before me this _____ day
of _____, 20_____

Fee Paid Signature of Notary Public My Commission Expires

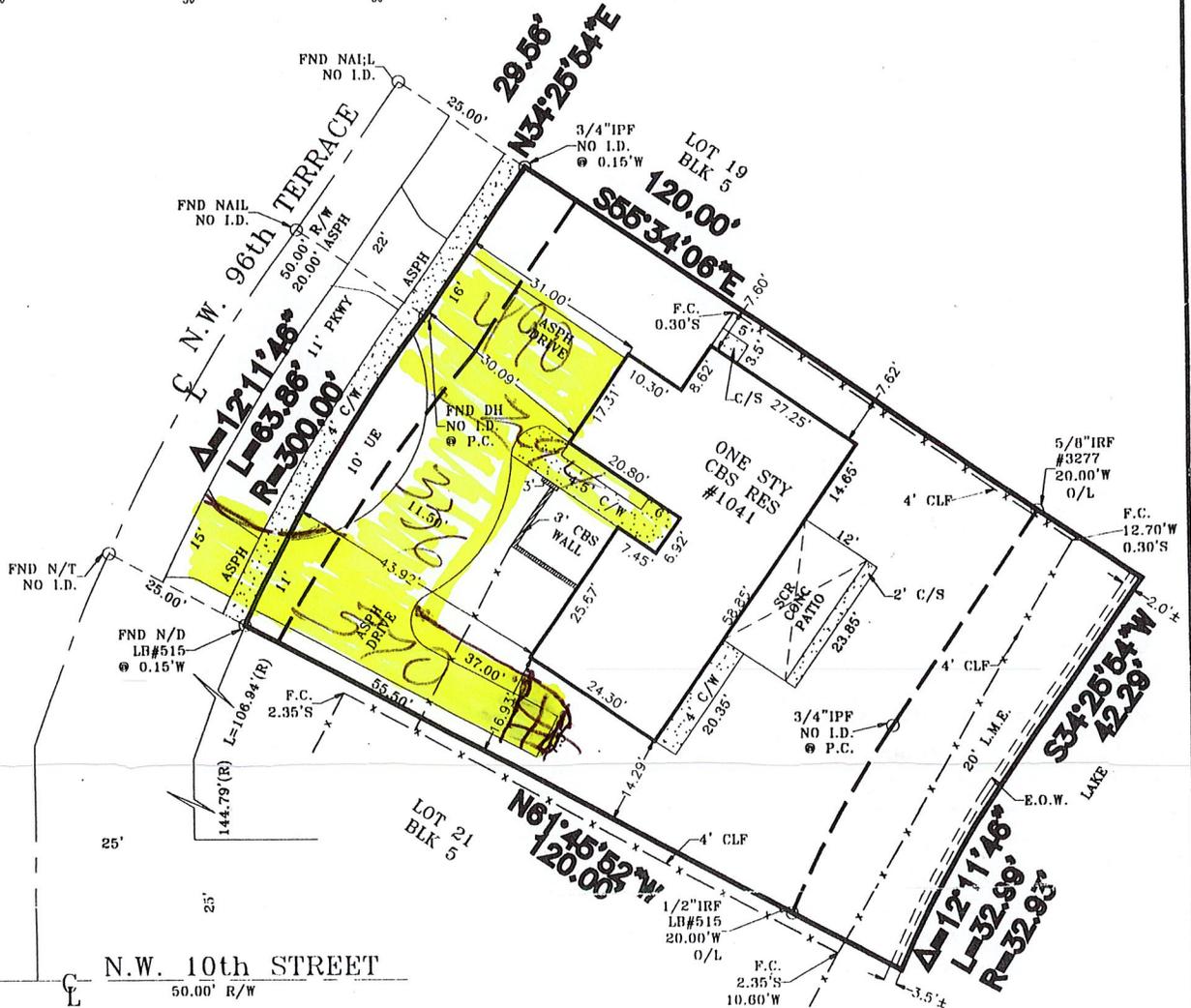
MAP OF BOUNDARY SURVEY

P & L SURVEYORS, INC.
 L.B. NO. 0008733
 4051 SHERIDAN ST. SUITE 355
 HOLLYWOOD, FLORIDA 33021
 DATE OF SURVEY NOVEMBER 6, 1998
 DRAWING NUMBER 98-2774

LEGAL DESCRIPTION:

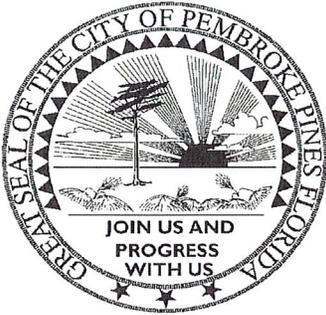
LOT 20, BLOCK 5, WESTVIEW SECTION THREE PART TWO, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 95, PAGE 1, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA.
 SAID LANDS LYING AND BEING IN THE CITY OF PEMBROKE PINES, BROWARD COUNTY, FLORIDA.

PROPERTY ADDRESS: 1041 N.W. 96th TERRACE, PEMBROKE PINES, FLORIDA



SURVEY NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THE SURVEYOR FOR RIGHT OF WAY AND/OR EASEMENTS OF RECORD.
2. THIS SKETCH REFLECTS ALL EASEMENTS AND RIGHTS OF WAY AS SHOWN ON THE REFERENCED RECORD PLAT.
3. SEE OTHER SIDE FOR LEGEND.
4. UNDERGROUND PHYSICAL USES AND/OR FOUNDATIONS NOT LOCATED OR SHOWN
5. BEARINGS HEREON ARE ASSUMED, REFER TO THE RECORD PLAT, AND ARE BASED ON THE CENTERLINE OF N.W. 96th TERRACE.
6. ELEVATIONS SHOWN HEREON (IF APPLICABLE) REFER TO N.G.V.D. 1929 AND ARE BASED ON BENCH MARKS PROVIDED BY BROWARD COUNTY ENGINEERING DEPT.
 B.M. = N. RIM MH @ N.W. 14th ST. & N.W. 93rd AVE.; ELEV. = 6.09
7. THIS BOUNDARY SURVEY IS NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.
8. LEGAL DESCRIPTION PROVIDED BY BROWARD TITLE COMPANY.



Type of Meeting

Board of Adjustment

QUASI-JUDICIAL PROCEEDINGS AFFECTED PERSON

INSTRUCTIONS: This form must be completed and returned to the City Clerk's office at least seven (7) calendar days before the meeting.

AFFECTED PERSON: (a person who is the owner of the subject property or who owns property within 500 feet of the subject property or who resides in or operates a business within 500 feet of the subject property)

CASE# ZV(R) 2017-10 - 11

PROJECT NAME: Ruben Langoni

MEETING DATE: January 4, 2018

NAME: RUBEN LANGONI

BUSINESS ADDRESS: _____

HOME ADDRESS: 1041 NW 96th TERR - P. PINES

TELEPHONE NUMBER: 514 257-4582

QUALIFIES AS "AFFECTED PERSON":

- Subject property owner
- Owns property within 500 ft.
- Resides within 500 ft.
- Operates a business within 500 ft.
- City of Pembroke Pines representative

Signature of Affected Person *Rubeni* Date: 12.19.2017

EVIDENCE TO BE PRESENTED: (identify and attach a copy of all evidence to be presented at the hearing. Use additional sheet(s) if necessary.)

A. _____

B. _____

C. _____

PROPOSED WITNESS LIST: (Use additional sheet for each witness)

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: () _____

SPEAKING: IN FAVOR OF PETITION AGAINST PETITION