



City of Pembroke Pines

Planning and Economic Development Department

Unified Development Application

Planning and Economic Development
 City Center - Third Floor
 601 City 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: _____

Plans for DRC _____ Planner: _____

Indicate the type of application you are applying for:

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

INSTRUCTIONS:

1. All questions must be completed on this application. If not applicable, mark *N/A*.
2. Include all submittal requirements / attachments with this application.
3. All applicable fees are due when the application is submitted (Fees adjusted annually).
4. Include mailing labels of all property owners within a 500 feet radius of affected site with signed affidavit (Applications types marked with *).
5. All plans must be submitted no later than noon on Thursday to be considered for Development Review Committee (DRC) review the following week.
6. 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 *).
7. 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.
8. 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: _____ Project #: PRJ 20____ - ____ Application #: _____

Date Submitted: ____/____/____ Posted Signs Required: (____) Fees: \$_____

SECTION 1-PROJECT INFORMATION:

Project Name: BD - 196th Ave. Townhouses

Project Address: SW 196th Avenue

Location / Shopping Center: East side of SW 196th Ave. approx. 2,300 feet South of Pines Blvd.

Acreage of Property: 3.9 net/ 4.8 gross Building Square Feet: _____

Flexibility Zone: 123B Folio Number(s): 5139-13-01-0140

Plat Name: FLA Fruit Lands Co. Sub. No. 1 Traffic Analysis Zone (TAZ): 838

Legal Description:

Please see attached 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: Iglesia Alianza Cristiana y Misionera de Pembroke Pines, Inc.

Owner's Address: 21011 Johnson St., Suite 131-132, Pembroke Pines, FL 33029

Owner's Email Address: trish@thealliancesoutheast.org

Owner's Phone: (407) 823-9662 Owner's Fax: _____

Agent: Greenspoon Marder LLP

Contact Person: Dennis D. Mele, Esq.

Agent's Address: 200 E. Broward Blvd., Suite 1800, Fort Lauderdale, FL 33301

Agent's Email Address: dennis.mele@gmlaw.com (CC: tyler.woolsey@gmlaw.com)

Agent's Phone: (954) 527-2409 Agent's Fax: (954) 333-2009

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: A-1

Zoning: TH-12

Land Use / Density: (A) Agriculture

Land Use / Density: Low-Medium (5-10 DU/AC)

Use: Vacant

Use: Residential (Townhomes)

Plat Name: FLA Fruit Lands Co. Sub. No. 1

Plat Name: _____

Plat Restrictive Note: _____

Plat Restrictive Note: _____

ADJACENT ZONING

ADJACENT LAND USE PLAN

North: RS-7

North: L-2

South: R-1c

South: L-2

East: A-1

East: A

West: A-1

West: A

-This page is for Variance, Zoning Appeal, Interpretation and Land Use applications only-

SECTION 4 – VARIANCE • ZONING APPEAL • INTERPRETATION ONLY

Application Type (Circle One): Variance Zoning Appeal Interpretation

Related Applications: _____

Code Section: _____

Required: _____

Request: _____

Details of Variance, Zoning Appeal, Interpretation Request:

SECTION 5 - LAND USE PLAN AMENDMENT APPLICATION ONLY

City Amendment Only City and County Amendment

Existing City Land Use: Agriculture (A)

Requested City Land Use: Low-Medium (5-10 DU/AC)

Existing County Land Use: Agricultural

Requested County Land Use: Low-Medium (10) Residential

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

Please see attached LUPA application package for further project details.

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.

Alfredo E. Gutierrez 3/13/19
Signature of Owner Alfredo E. Gutierrez, President / District Superintendent Date

Sworn and Subscribed before me this 13 day
of March, 2019



0 Patricia A. Santos June 20, 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

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.

Rafael E. Gutierrez 3/12/19
Signature of Owner Rafael E. Gutierrez, President / District Superintendent Date

Sworn and Subscribed before me this 13 day
of March, 2019



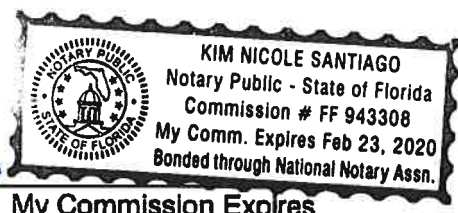
0 Patricia A. Santos June 20, 2019
Fee Paid Signature of Notary Public My Commission Expires

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.

Ken D. Mel 5/15/19
Signature of Agent Date

Sworn and Subscribed before me this 15 day
of May, 2019



Kim Nicole Santiago
Fee Paid Signature of Notary Public My Commission Expires