



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: 1/29/19

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:

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: Dean Project #: PRJ 20 n/a Application #: ZV(R)2019-06-07
Date Submitted: 02/07/19 Posted Signs Required: (1) Fees: \$ 500

SECTION 1-PROJECT INFORMATION:

*Project Name: DRIVEWAY.

*Project Address: 6409 SW 7 ST Pembroke Pines FL 33023

Location / Shopping Center: _____

Acreage 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: ALFREDO ANGULO

* Owner's Address: 6409 SW 7 ST PEMBROKE PINES FL 33023

* Owner's Email Address: ALNA64@HOTMAIL.COM

* Owner's Phone: _____ Owner's ^{Cell:} ~~Fax:~~ 954-275 8507

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

Zoning: _____

Land Use / Density: _____

Use: _____

Plat Name: _____

Plat Restrictive Note: _____

PROPOSED

Zoning: _____

Land Use / Density: _____

Use: _____

Plat Name: _____

Plat Restrictive Note: _____

ADJACENT ZONING

North: _____

South: _____

East: _____

West: _____

ADJACENT LAND USE PLAN

North: _____

South: _____

East: _____

West: _____

-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: N/A

Code Section: ① 52.26(G) ② 155.106 (E)(2)(a)

Required: ① 5' side yard setback for driveway ② 7 1/2' side yard setback for Roofed Structure

Request: ① 3' side yard setback for driveway ② 0' side yard setback for covered walkway/slab

Details of Variance, Zoning Appeal, Interpretation Request:

*① ON THE EAST SIDE OF THE PROPERTY, THE DRIVEWAY IS CURRENTLY (2') FROM THE PROPERTY LINE. I WILL ^{be} REMOVING (SAW-CUTTING) ONE (1') FOOT OF THE DRIVEWAY ON THE EAST SIDE, MAKING IT THREE (3') FEET FROM THE PROPERTY LINE. WE ARE REQUESTING A VARIANCE OF TWO (2') FEET.

EXISTING SIDE SET BACK FOR THIS RESIDENCE IS 5'-0" FOR DRIVEWAY AND 7'-6" FOR EXTENSION TO PROPERTY. WE ARE REQUESTING A 3'-0"

② EXCEPTION FOR OUR CHILD WITH SPECIAL NEEDS TO GET ACCESS AS A COVERED PATHWAY TO THE REAR OF THE HOUSE, AND COVERED

SECTION 5 - LAND USE PLAN AMENDMENT APPLICATION ONLY

☐ City Amendment Only

☐ City and County Amendment

Existing City Land Use: _____

Requested City Land Use: _____

Existing County Land Use: _____

Requested County Land Use: _____

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

* PATIO TO GET ENTRANCE TO THE HOUSE AND HIS BED-ROOM TO THE REAR OF THE HOUSE. HIS SPECIAL NEEDS CAN NOT BE MET WITHOUT THIS COVERED WALKWAY AND COVERED PATIO. THE FRONT DOOR RESTRICTS HIS ACCESS TO HIS ROOM IN THE BACK OF THE HOUSE.

DESCRIPTION OF PROJECT: (1) SAW CUT ONE (1') FOOT OF THE DRIVEWAY ON THE EAST SIDE, MAKING IT THREE (3') FROM THE PROPERTY LINE. (2) REMOVE EXISTING CANOPY LOCATED ON THE BACK OF THE HOUSE AND BUILD NEW COVERED PATIO ATTACHED TO THE EXISTING PORCH.

SECTION 7- PROJECT AUTHORIZATION

OWNER CERTIFICATION

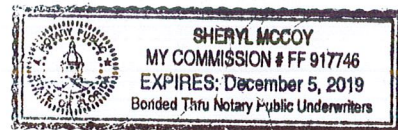
This is to certify that I am the owner of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge.

* Alfredo Bragado
Signature of Owner

02/07/2019
Date

Sworn and Subscribed before me this 7th day

of February, 20 19



Fee Paid

[Signature]
Signature of Notary Public

12/05/19
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

RE: Alfredo Angulo

6409 SW 7th Street

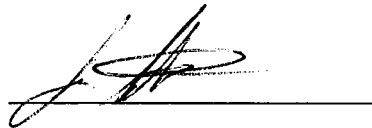
Pembroke Pines, Florida

To whom it may concern:

The property at this address is owned by Alfredo Angulo. I am in favor of allowing him a variance for his driveway setback.

Mr. Angulo has lived at this property since December 1991. He does well to keep this property in good condition.

Sincerely,

A handwritten signature in black ink, appearing to read "James Spatafora", written over a horizontal line.

James Spatafora

700 SW 64TH TERRACE

PEMBROKE PINES FL 33023

RE: Alfredo Angulo

6409 SW 7th Street

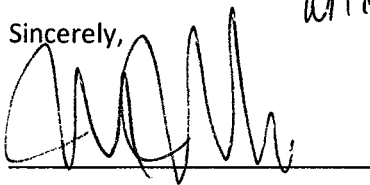
Pembroke Pines, Florida

To whom it may concern:

The property at this address is owned by Alfredo Angulo. I am in favor of allowing him a variance for his driveway setback.

Mr. Angulo has lived at this property since December 1991. He does well to keep this property in good condition.

Sincerely,

A handwritten signature in black ink, appearing to be "Michael W. W.", written over a horizontal line.

Michael W. W.

6414 SW 7 ST
Pembroke Pines FL 33023

RE: Alfredo Angulo

6409 SW 7th Street

Pembroke Pines, Florida

To whom it may concern:

The property at this address is owned by Alfredo Angulo. I am in favor of allowing him a variance for his driveway setback.

Mr. Angulo has lived at this property since December 1991. He does well to keep this property in good condition.

Sincerely,

Gabino Rodriguez

64-11 SW 7th

33023



STONER & ASSOCIATES, Inc.
SURVEYORS - MAPPERS
Florida Licensed Survey
and Mapping Business No. 6633

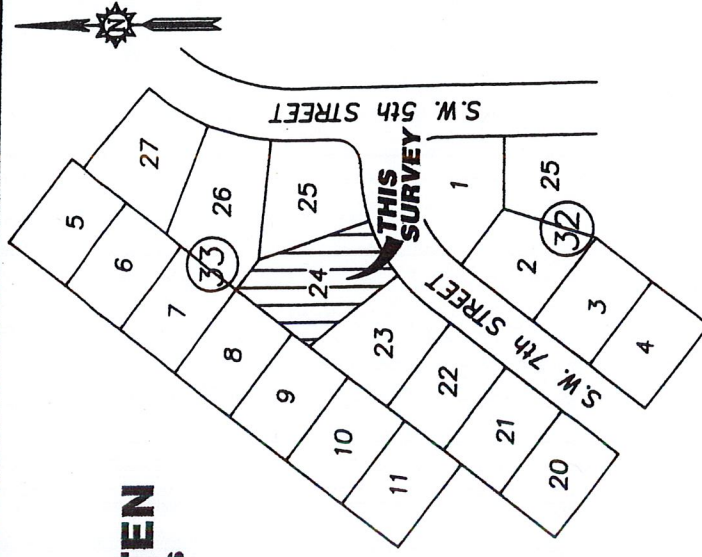
4341 SW 62nd Avenue
Davie, Florida 33314

Tel. (954) 585-0997
Fax (954) 585-3927

**SKETCH OF AS-BUILT
LOT 24, BLOCK 33
BOULEVARD HEIGHTS SECTION TEN**
PLAT BOOK 51, PAGE 15, BROWARD COUNTY RECORDS
PEMBROKE PINES, FLORIDA

LEGEND:

| | |
|--------|------------------------|
| P.B. | PLAT BOOK |
| P.G. | PAGE |
| B.C.R. | BROWARD COUNTY RECORDS |
| (M) | MEASURED |
| (P) | PER PLAT OF RECORD |
| I.D. | IDENTIFICATION |
| LB. | LICENSED BUSINESS |
| CONC. | CONCRETE |
| OHW | WOOD POWER POLE |
| OHW | OVERHEAD WIRES |
| WM | WATER METER |
| SM | SANITARY MANHOLE |
| EL. | ELEVATION |
| A/C | AIR CONDITIONER |
| ELEC. | ELECTRIC |
| ☐ | CENTERLINE |
| —//— | WOOD FENCE |
| —X—X— | CHAIN LINK FENCE |



LOCATION MAP

NOT TO SCALE

