



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: 5/21/19

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) 2019-19 thru 24
Date Submitted: 07/31/19 Posted Signs Required: (1) Fees: \$ 1,500.00

SECTION 1-PROJECT INFORMATION:* Project Name: JASON S FERNANDEZ* Project Address: 9020 NW 21 ST Pembroke Pines, FL 33024

Location / Shopping Center: _____

Acreage of Property: _____ Building Square Feet: _____

Flexibility Zone: _____ Folio Number(s): _____

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

* Legal Description:

LOT 4, BLOCK 3 UNIVERSITY HEIGHTS

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: JASON S FERNANDEZ

*Owner's Address: 9020 NW 21 ST Pembroke Pines FL 33024

*Owner's Email Address: JFA1960@HOTMAIL.COM

work - *Owner's Phone: 954-972-9122 Owner's ^{Cell:} ~~Fax:~~ 786-426-4884

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: See Attached

Required: _____

Request: _____

Details of Variance, Zoning Appeal, Interpretation Request:

X SEE ATTACHED

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: _____

Variances for Jason Fernandez @ 9020 NW 21st Street.

ZV(R) 2019-23: Section 52.26(C)

51.5% (33.5') total width of driveway, instead of allowed maximum allowed 40% (26') total width.

ZV(R) 2019-21: Section 52.26(G)

0' east side yard setback for driveway, instead of required 5' side yard setback.

ZV(R) 2019-22: Section 52.26(G)

0' west side yard setback for driveway/walkway, instead of required 5' side yard setback.

ZV(R) 2019-24: Section 52.26(H)(1)

62% Total front yard lot coverage with driveway/walkway, instead of allowed maximum 35%.

ZV(R) 2019-19: Section 155.049(B)

2.8' rear yard setback for shed on slab, instead of required 5' rear yard setback.

ZV(R) 2019-20: Section 155.049(B)

2.25' east side yard setback for shed on slab, instead of required 5' side yard setback.

The FERNANDEZ Residence

9020 N.W. 21st Street ▪ Pembroke Pines, Florida 33024 ▪ Phone Number: (786) 426-4884

The City of PEMBROKE PINES
601 S.W. City Center Boulevard
Pembroke Pines, Florida 33025

May 22, 2019

Re: **Inspections Bureau**

To Whom it may concern:

The purpose of this letter is to inform the Department of Building Inspections that on December of 2010 I purchased my house located at 9020 NW 21st Street in Pembroke Pines, Fl. 33024, the house has 3 Bedrooms, 2 baths about 1,880 sq. ft. perfect for our family.

The house was in good conditions, but it needed TLC and I decided to begin replacing the old windows and upgrading it to **Hurricane Proof windows**, the Central Air Conditioning unit was also upgraded it, in addition, I had to do repairs on the roof, by this time, I had spent close to 60K In replacing old equipment, not to mention the exterior/interior painting, landscaping and much more totaling approximately 80K.

However, recently I've decided to replace the **Shadow Box Wooden Fence** I currently have for a new **Plastic PVC Fence** that HOME DEPOT was selling, and I decide it to buy it. After signing a contract with **THD Fence Company**, a sub-contractor company for HOME DEPOT, it was brought to my attention that there was a problem with my Fence Permit. I asked them about the problem and apparently, I was told that the City of Pembroke Pines is stating that there is no Docket number or permit on file for the construction job that was done eight years ago on my driveway sidewalk and Shed slab. In summary, I already have paid 13K to HOME DEPOT three months ago for the new fence and the job still pending.

On the other hand, I've decided to look and search throughout all my old paperwork for the construction that was issued eight years ago, and I found out that the company I hired to do the job is no longer in business and the telephone is disconnected. I am assuming, the company I hired did the job without a permit and I wasn't aware of it. I am an Account Executive and my job requires that I traveled frequently, most of the time out of the Country. I recalled that I was out of the Country and my wife was handling the construction project during my absence, therefore I didn't follow up with the regulations of the permit and inspection procedures, which was my biggest mistake. I always make sure that every project that is done in my property is in accordance with the City codes, policy and regulations procedures.

In conclusion, my family and I have been living in this beautiful neighborhood for almost nine years and we love this neighborhood. My two older sons also live in this area as well and one of them is the Fire Department Captain in the City of Miami and the other one is a Police Officer for the City of Sunrise, we have four beautiful grandchildren and we are all very happy to be living in the same city. I hope to hear from someone in your office soon and thank you in advance for reading this letter.

Best Regards,

Jason Fernandez



SECTION 7- PROJECT AUTHORIZATION

OWNER CERTIFICATION

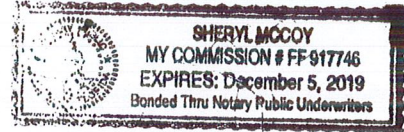
This is to certify that I am the owner of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge.

[Signature] 7-31-19
Signature of Owner Date

FLDL
F655-437-60-219-0

Sworn and Subscribed before me this 31st day

of July, 2019



Nil
Fee Paid

[Signature]
Signature of Notary Public

12/05/2019
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

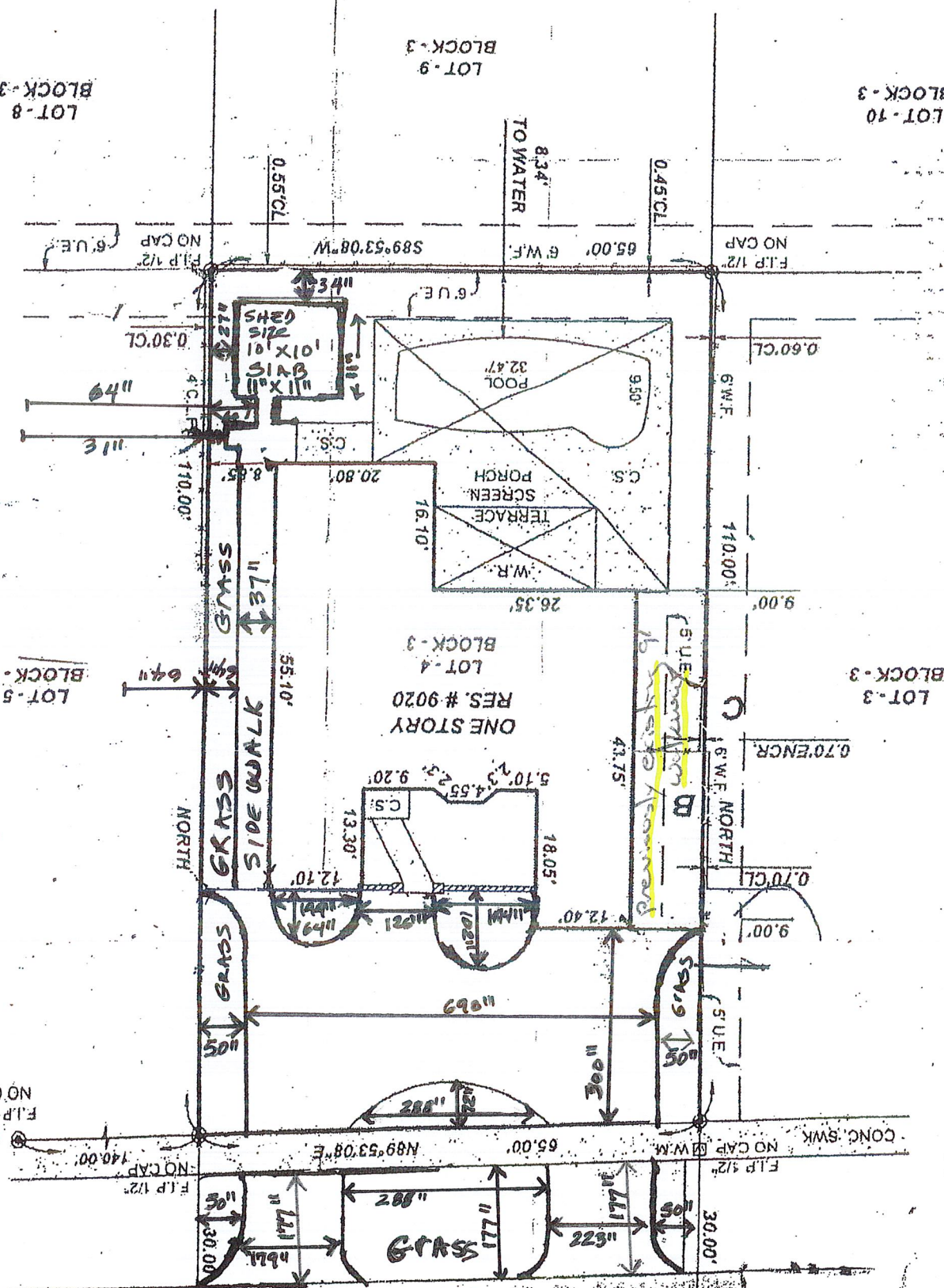
TOTAL RW
60.00'

N.W. 21st STREET

B.O.B. N89°53'08"E

22' ASPHALT

P.V.M.T.



LOT-3
BLOCK-3

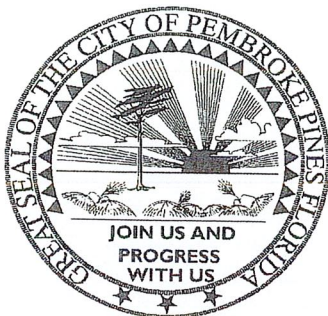
LOT-10
BLOCK-3

LOT-4
RES. # 9020
ONE STORY
BLOCK-3

LOT-5
BLOCK-3

LOT-8
BLOCK-3

LOT-9
BLOCK-3



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) 2019-19 - 24

PROJECT NAME: Jason S. Fernandez

MEETING DATE: September 4, 2019

NAME: Roger K Sheffield

BUSINESS ADDRESS: _____

HOME ADDRESS: 9040 NW 21 St Pemb Pines FL

TELEPHONE NUMBER: (954) 5470425

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 RK Sheffield

Date: 8/22/19

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. _____

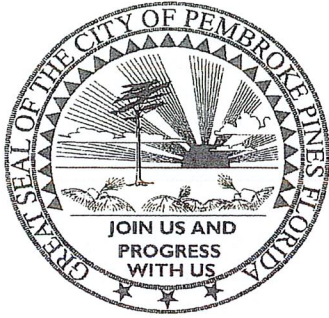
PROPOSED WITNESS LIST: (Use additional sheet for each witness)

NAME: Roger K Sheffield

ADDRESS: 9040 NW 21 St Pemb Pines FL

TELEPHONE NUMBER: (954) 5470425

SPEAKING: ☒ IN FAVOR OF PETITION ☐ AGAINST PETITION



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) 2019-19 - 24

PROJECT NAME: Jason S. Fernandez

MEETING DATE: September 4, 2019

NAME: Jason S. Fernandez

BUSINESS ADDRESS: _____

HOME ADDRESS: 9020 NW 21 ST P PINS FL 33024

TELEPHONE NUMBER: (786) 424-4884

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 _____

Date: 8-19-19

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. _____

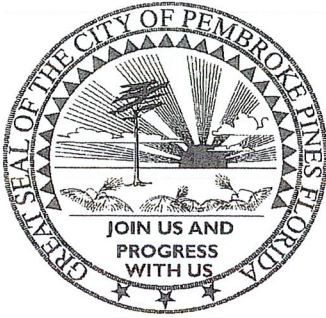
PROPOSED WITNESS LIST: (Use additional sheet for each witness)

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: () _____

SPEAKING: ☒ IN FAVOR OF PETITION ☐ AGAINST PETITION



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) 2019-19 - 24

PROJECT NAME: Jason S. Fernandez

MEETING DATE: September 4, 2019

NAME: Michelle Davis

BUSINESS ADDRESS: 9030 NW 2155 P Pines Pl 33024

HOME ADDRESS: _____

TELEPHONE NUMBER: (786) 320-0719

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

Michelle Davis

Date: 8/28/19

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)

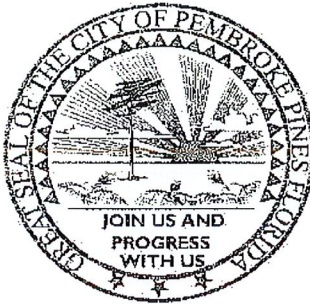
NAME: Michelle Davis

ADDRESS: 9030 NW 2155 P Pines Pl. 33024

TELEPHONE NUMBER: (786) 320-0719

SPEAKING: ☒ IN FAVOR OF PETITION

☐ AGAINST PETITION



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) 2019-19 - 24

PROJECT NAME: Jason S. Fernandez

MEETING DATE: September 4, 2019

NAME: Vladimir Goutel

BUSINESS ADDRESS: 9010 NW 21 ST, P Pines FL 33024

HOME ADDRESS: _____

TELEPHONE NUMBER: (786) 282-8202

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: [Signature]

Date: 09-03-19

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)

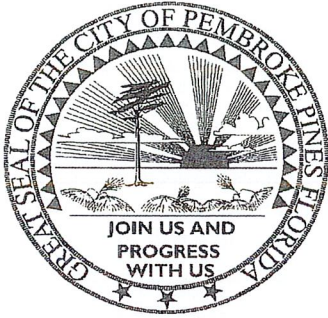
NAME: Vladimir Goutel

ADDRESS: 9010 NW 21 ST P Pines FL 33024

TELEPHONE NUMBER: (786) 282-8202

SPEAKING: ☒ IN FAVOR OF PETITION

☐ AGAINST PETITION



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) 2019-19 - 24

PROJECT NAME: Jason S. Fernandez

MEETING DATE: September 4, 2019

NAME: ROXANA ROVIRA

BUSINESS ADDRESS: 8901 NW 21 ST Pembroke Pines FL

HOME ADDRESS:

TELEPHONE NUMBER: (av) 224-8889

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

Date: 8-19-19

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