

City of Margate DEVELOPMENT REVIEW COMMITTEE Application for Special Exception (existing)

5790 Margate Blvd Margate FL 33063

Submittal Date (official use):

OF FLO	954-972			11-12-14 P12:24 RUVU
Project Name	· ·			
Mityan	Jimenez		2.	
Address	elaleuch D	1. Maryate	33663	DRC# 11-14-06
Acreage	Calla Mamban	6 -62 - 46		Paid: \$ 500.00
Existing Use Rental	A prantmy)		
Legal Description Heights Sec 2 34-46.B				
1.0 t	1 / 0 3 6) 12 / 2			
D				
Describe proposal/request in detail	11 / 1			
1 See A	Hacheb.			
Agent/Contact Name				
Agent/Contact Name				$u: \mathcal{N}_{q-1}$
Address				
Phone Number		Fax Number	700000000000000000000000000000000000000	
Email Address				
Property Owner Name	am Jimen	07		
Address	Lyons Ad &			
Coconit	Creen FL			
Phone Number 954 608 4	067	Fax Number	007	3/
Carall Address	em @ Bellsouth.	. / 6		

OWNER'S AFFIDAVIT: I certify that I am the owner of record for the above referenced property and give authorization to file this petition. I understand that I, or a representative on my behalf, must be present at the DRC meeting. I further understand that my petition will be subject to the regulations of Chapter 16 1/2 of the Margate City Code.

Property Owner's Signature

11-10-14



PUBLIC HEARING SIGN REMOVAL BOND AGREEMENT In accordance with Ordinance #1500.485

I, Minyam Timener	, petitioner of record and
on behalf of the property owner, hereby agree that the subject pu	blic hearing sign shall be removed
within two (2) business days following a final determination by t	he governing body. Further, it is
understood that by complying with this section, the \$150 cash bo	and will be returned to the petitioner of
record.	
If said public hearing sign is not removed in two (2) business day	ys, I hereby authorize the administration
of the City of Margate to remove said sign, billing the costs of th	e removal of the sign to the owner of
the property.	
I understand that the \$150 (one hundred fifty dollar) cash bond si	hall be forfeited and applied against the
cost of removal to the City of Margate if said public hearing sign	is not removed in two (2) business
days.	
LILLY E. LIC	OFFICE USE ONLY
MMJ Financial Services Inc	Date of Decision:
Business Name	Tabled to date certain?
5379 Lyone A #154	Two Business Days (after decision)
Address Charles B 33078	COMPLIED? Y N
COCONET C. COC. (C 2507)	If YES, initiate check request to Finance (603-
Signature	0000-220.18-00)
	If NO, inform Finance to deposit Bond (001-0000-369.90-01)
11-10-14	
Date	1

PUBLIC HEARING SIGN REMOVAL BOND AGREEMENT In accordance with Ordinance #1500.485

	4.5
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If said public hearing sign is not (2) business days, I hereby Administration of the City of Margaid sign, billing the costs of the sign to the owner of the property.	removed in two authorize the gate to remove
I understand that the \$150 (one dollar) cash bond shall be forfeite against the cost of removal to the 0 if said public hearing sign is not (2) business days.	ed and applied City of Margate
MMJ Financial Services Inc Business Name	OFFICE USE ONLY
Signature Melalecca Drive Maryaha FL 33063 Signature	Date of Decision: Tabled to date certain? Two Business Days (after decision) COMPLIED? Y N If Yes, initiate check request to Finance (601-0000-220.18-00). If No, inform Finance to deposit bond (001-0000-369.90-01).
Date	Signature / Date

Signature / Date

Copy to Petitioner, Finance Department . Original to File

PROPERTY OWNER CERTIFICATION AND PERMISSION TO PROCEED

I hereby certify that I am the owner of the property local	ated at 603 Melalecen Dr
being the subject property for this variance application,	and I give authorization to
Miryam Jimenoz	to file this petition for the said
variance.	
Milana	719
Print owner's name	Signature of owner
·	
Subscribed and sworn to before me this	1 day of September
2014.	_
	JULIA R. KHAOULI
Signature of Notary	Print or type name of Notary
Personally known to me	JULIA R KHAOULI MY COMMISSION # EE099485 EXPIRES June 02, 2015 FloridaNotaryService.com
Produced identification #	

*** CUSTOMER RECEIPT City of Margate ***

Batch ID: AMORALES

11/17/14 00

24121 Receipt no:

Description Amount ECDV SPECIAL EXECPT. USE Type SvcCd Description EI ECDV SPECIAI

\$500.00

1.00 Qty MMJ FINANCIAL SERVICES INC

RE:SPECIAL EXCEPTION EXPEDITED 5379 LYONS RD STE 154 COCONUT CREEK, FL 33073-2810

603 MELALEUCA DRIVE

CK Ref#:

1763

Tender detail

\$500.00 \$500.00 \$500.00

Total tendered: Total payment:

Time: 16:11:17 11/17/14 Trans date:

HAVE A GREAT DAY!

Conversion of 603 Melaleuca:

Questions asked by the Associate Planner.

- 1. What type of facility?
- 2. How many square feet of living space does the facility have?
- 3. How many residents?
- 4. How many bedrooms?
- 5. How many bathrooms?
- 6. What are the sleeping arrangements for each apartment? (i.e. how many beds per room, how many residents per bedroom, etc.)
- 7. What services will the facility provide?
- 8. Are residents able to take care of their personal hygiene?
- 9. What is the staffing ratio?
- 10. How many or what staffing will be living at the facility?
- 11. Staff that is not living at the facility, how often will they be at the facility and where will they park?
- 12. Fire alarm system?
- 13. Sprinkler system?
- 14. How many parking spaces?
- 15. Will there be specific parking for staff? For visitors?
- 16. Where will the provided transportation park?
- 17. How often will the provided transportation run?
- 18. How large is the vehicle for the provided transportation? Is this vehicle owned by the facility?
- 19. When are visitation appointments? (i.e. Saturdays only, weekdays, etc.) What are the hours?
- 20. Is there a limitation on how many visitors are allowed at the facility at a time?
- 21. What space are you planning on renting or buying for additional entertainment and family visitation space?

Conversion of 603 Melaleuca;

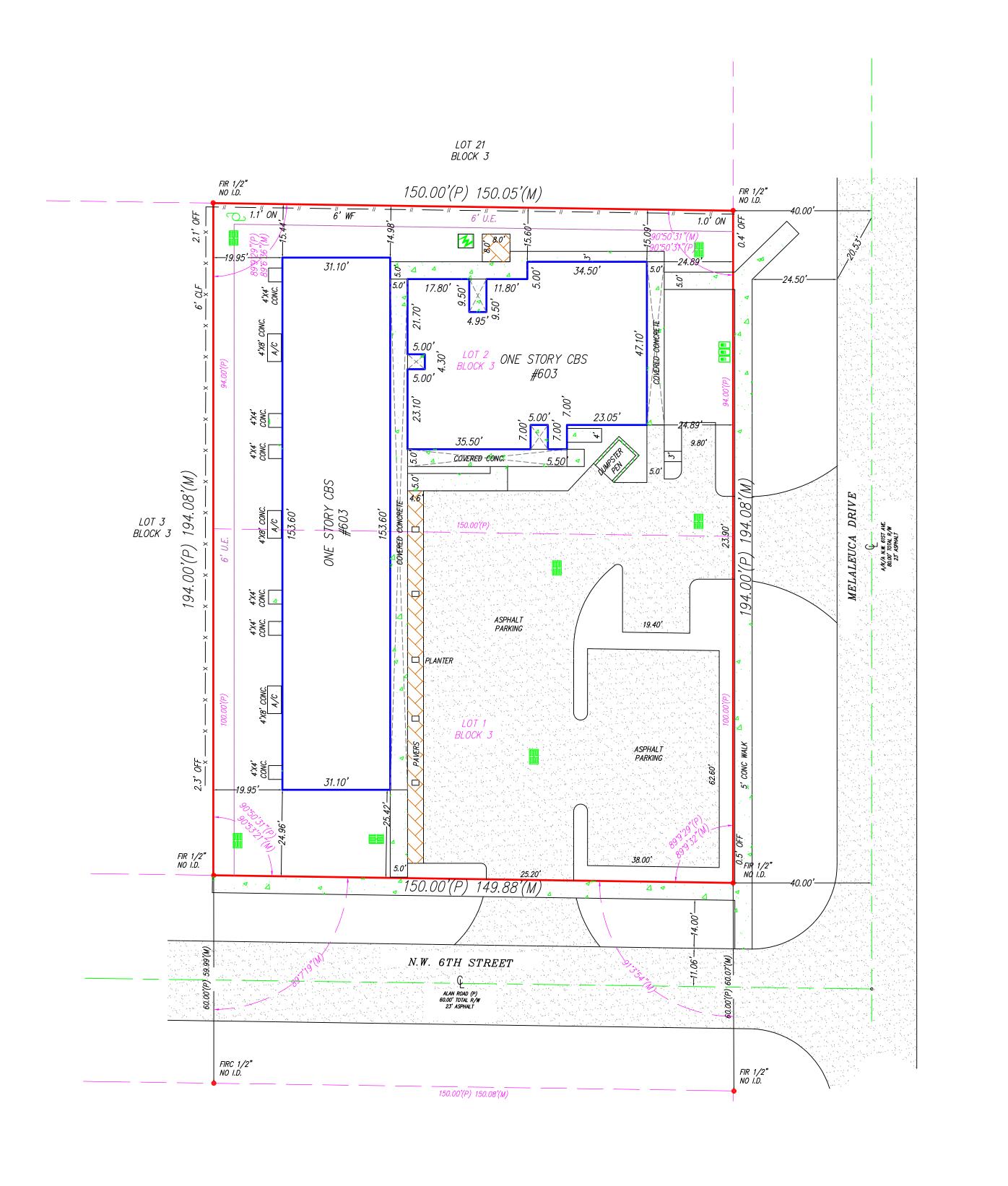
Answers:

- 1. Convert the apartment building to an Independent Living Facility.
- 2. The complex has approximately 9,400. Sf.
- 3. It will have a max of 32 residents.
- There are 20 bedrooms.
- 5. There are 18 bathrooms.

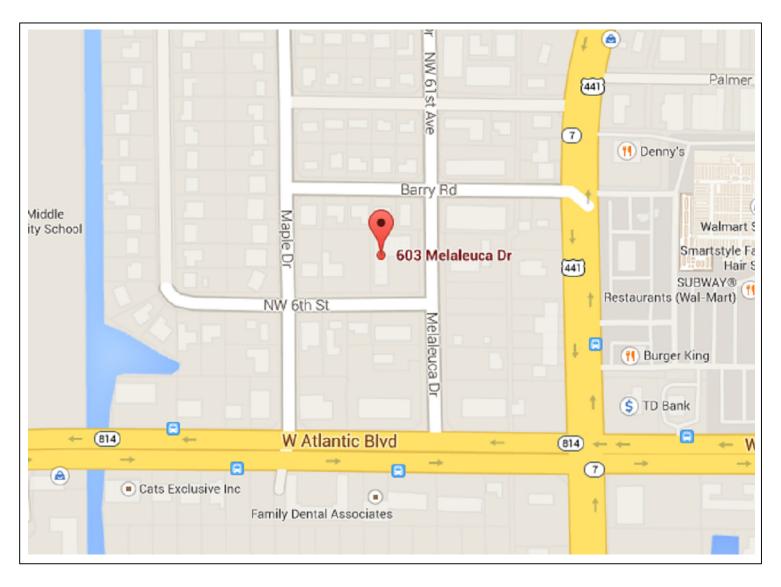
An apartment will have a maximum of 4 people. It will depend on people preference and budget. As a private facility a Shared 2 bedroom will be \$x. per month per person. A couple can decide to take the full 2 bedroom for \$x. Price is not per bed since they are not getting just a room.

- 6. Each apartment will be equipped with internet, cable TV, and laundry facility. They will have included housekeeping services; laundry for linens, (personal laundry will be included for an extra fee), transportation to the grocery store, Drs, restaurants, etc.
- 7. Converted to an Independent Living Facility. People are relatively healthy, they normally can't or do not want to drive and do not want to live by themselves.

- 8. There is no set staffing ratio on an Independent Living Facility, people are relatively healthy. There will be two housekeepers, one nurse practitioner and a chauffeur per an 8 hour shift. One RN on call 24/7.
- 9. No staff will live in the facility, they will work their shifts.
- 10. The staff will park at the facility.
- 11. The building is equipped with 3 smoke detectors per apartment and proper fire extinguishers.
- 12. If the building is approved to be converted to an ILF and the code requires sprinkle system, it will be installed per code.
- 13. There are 21 parking spaces.
- 14. There will be 4 parking for staff, 10 for visitors, 7 spare.
- 15. One 8 passenger van parked on the premises.
- 16. At the facility.
- 17. It is not per run, company vehicle will be parked at the premises and scheduled as a per needed basis.
- 18. Will be an 8 passenger van own by the facility.
- 19. The number of visitors will be scheduled on different days and times of the week. It will be scheduled that the number of visitors will not exceed the number of parking spaces in the facility. The residents and staff will meet and decide days and times of visitation.
- 20. Yes there will be. However it is known that people normally chose to live in an ILF because they do not want to live by themselves and they do not have lots of relatives or friend to visit them.
- 21. I want to purchase another building to provide a large Gym, pool tables and the like, but first I need to get your guys permission to open the facility and to get it full of people.

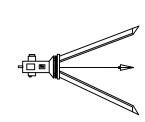


LOCATION MAP:



AERIAL VIEW:

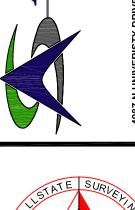




StateSurveying of the Art Land Surveying & Mapping









DATE: 01/02/13 SITE LOCATION : 603 MELALEUCA DRIVE MARGATE, FL 33063 **CERTIFICATIONS:** MIRYAM JIMENEZ

LEGAL DESCRIPTION: **SECTION**: 36-48-41

LOTS 1 AND 2, BLOCK 3, OF HAMMON HEIGHTS SECTION 2, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 34, PAGE 46, OF THE PUBLIC RECORDS OF

COUNTY: BROWARD

BROWARD COUNTY, FLORIDA. A/K/A; THE COMMON AREAS AND LIMITED COMMON AREAS AS MORE FULLY DESCRIBED IN SECTION 3 OF THE DECLARATION OF CONDOMINIUM AS RECORDED IN THE OFFICIAL RECORDS BOOK 41272, PAGE 560-561.

COMMUNITY NUMBER: 120047 DATE OF INDEX: 08-18-92 SUFFIX: F

FLOOD ZONE INFORMATION:

JOB NUMBER: MEL.DR.07-14

PANEL NUMBER: 0115 BASE FLOOD ELEV: AH 11.0' FLOOD ZONES "B", "C", "D", & "X" ARE NOT IN DESIGNATED FLOOD HAZARD ZONE AREAS

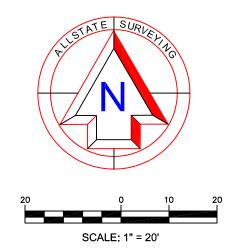
I HEREBY CERTIFY THAT THIS SKETCH OF SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND TO THE BEST OF MY KNOWLEDGE AND BELIEF SAID SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 5J-17 FLORIDA ADMINISTRATIVE CODE FURTHER, THIS DOCUMENT IS ELECTRONICALLY SIGNED AND SEALED PURSUANT TO SECTION 472.027, OF THE FLORIDA STATUTES AND CHAPTER 5J-17 OF THE FLORIDA ADMINISTRATION CODE.

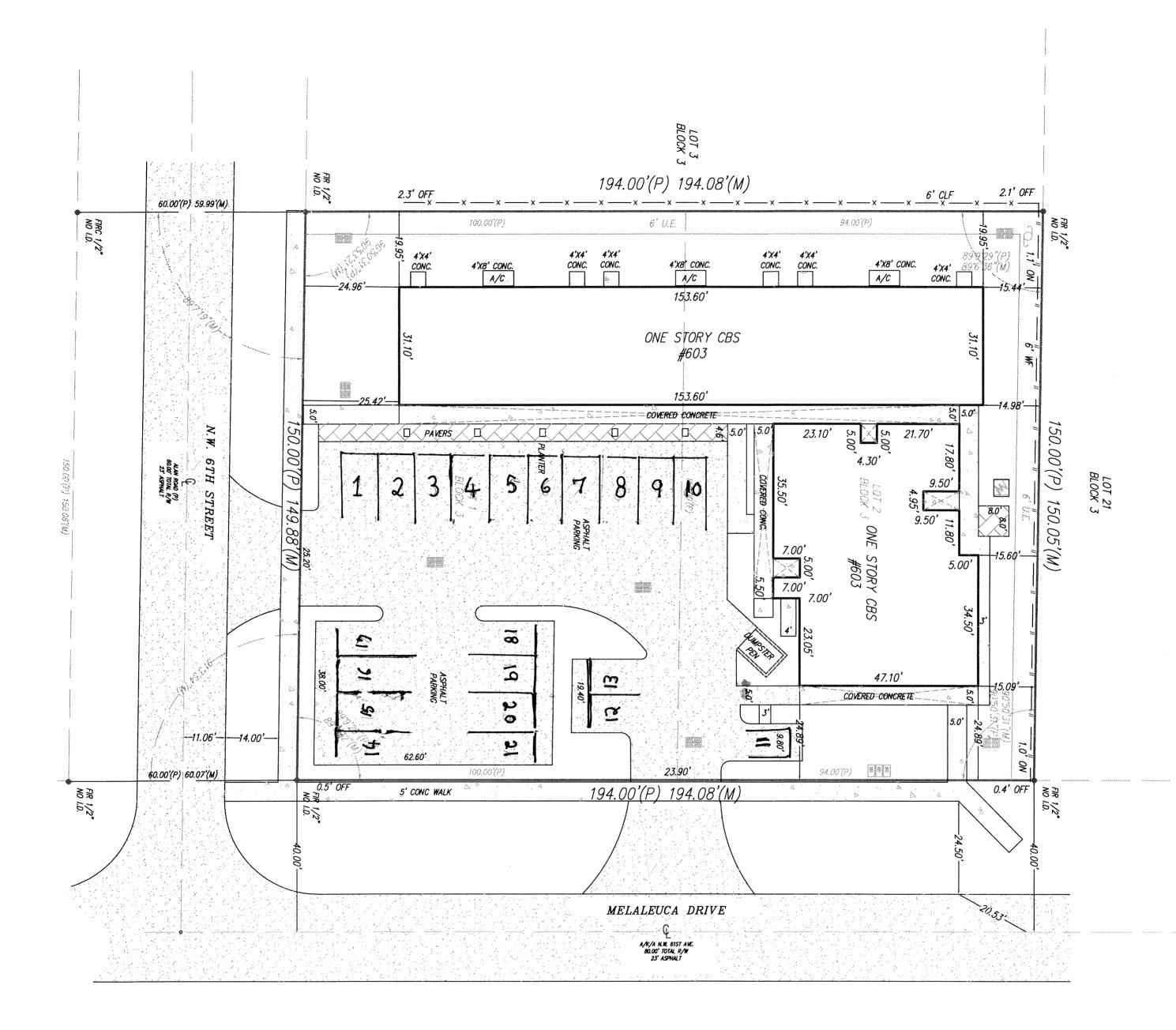
SURVEYOR CERTIFICATION:

FIELD DATE 07-10-2014 SIGNED 07-13-2014 BILL H. HYATT, JR. PROFESSIONAL LAND SURVEYOR LICENSE NUMBER: 4636 STATE OF FLORIDA



SURVEYOR SEAL:





21 Parking.

All Terrain Landscaping

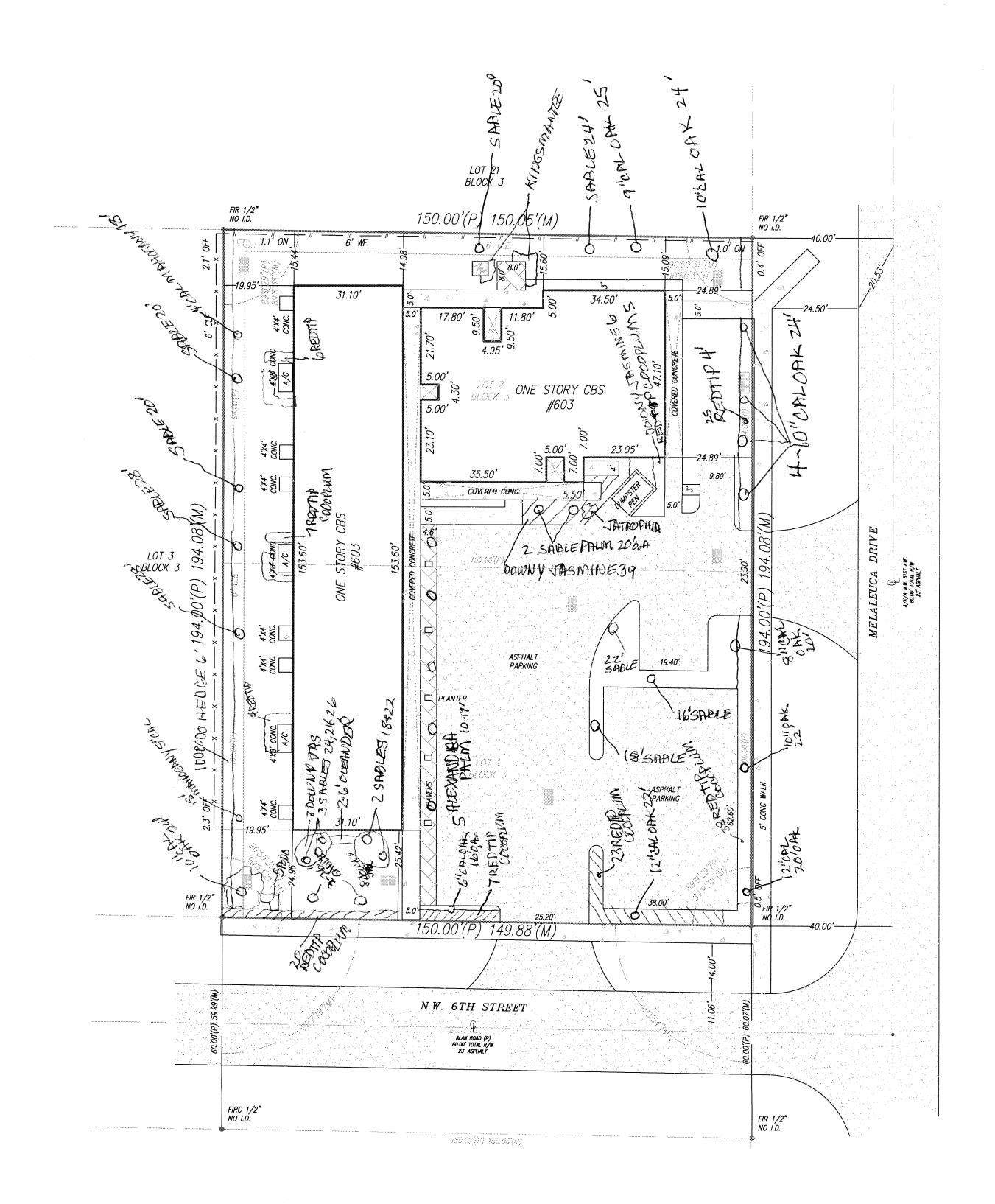
7250 NW 84th Avenue
Parkland, FL 33067
Phone (954) 565-6453 – Cell(954) 658-5040
MikeAllTerrain@aol.com
Serving South Florida Since 1981

Ď	ALONG MELALEUCA NTO SOUTH	
	5-10"LIVE OAK 24" 1-8"LIVE OAK 20"	25-REDTIP COCOPLUM4'
	1-10"/2 N EOAK 22"	38 RED TIP COCOPLUMY
2)	ALONG FRONT OF BUILDING	
1	5 ALEXANDRA PALM 10-17	6 DOUNINTASMINE 3'
		5 REDTIPCOCOPLUM 4
		39 DOWNY TASMINE 3'
3)	FRONT PARKING LOT	7.211112-3
	22'SABLES 16'SABLES	38
4)	SOUTH PROPERTYLINE (LEFT)	CALONG NW 6 STREET
	1-12'CALOFK22',	23 REDTIP CocoPun
	1-6'CALLIVEOAK 16'0A	7 REDTIP COPULM
	2-26'SABLES	20-REDTIP COOPLUM
	1-10"CALLIVEOAK24"	5 PODOCARPUS 5
3	BACK DROPERTY LINE (WEST	The second secon
	BACK DROPERTY LINE (WEST	
	1- 1/201 maitra AMILLON	100 PODOCARDUS 5

1-81CAL MAHOGANY 181 100 YODOCHRPUS 5 2-28'SABLE 2-20'SABLE 1-4'CAL MAHOGANY 151 6) BACK PROPERTY LINE (NORTH) (RIGHT)

1-20'SABLE 6 KINGSMANTLE 1-24'SABLE 1-9'CALLIVEOAK 25' 1-10"CALLIVEOAK 24' DAPONIVEST INTERIOR

7) " INTERIOR LEFT SIDE BACKWEST INTERIOR 3-26 SABLES 15 DOWNY TASMINE 17 RED TIP COMPLY M ARUNDS ACUNT





SITE LOCATION:

DATE: 01/02/13

LEGAL DESCRIPTION:

SECTION: 36-48-41

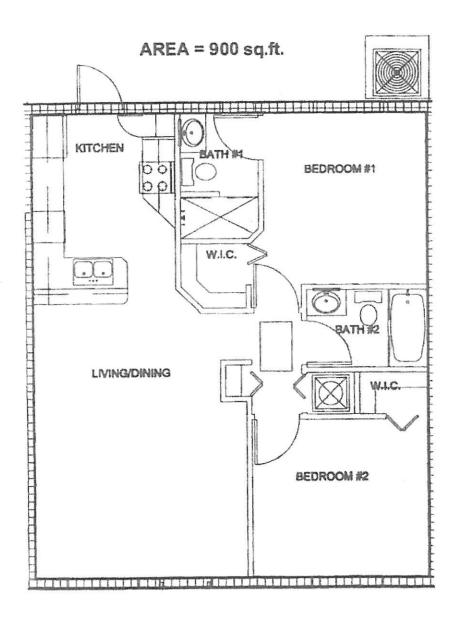
COUNTY: BROWARD

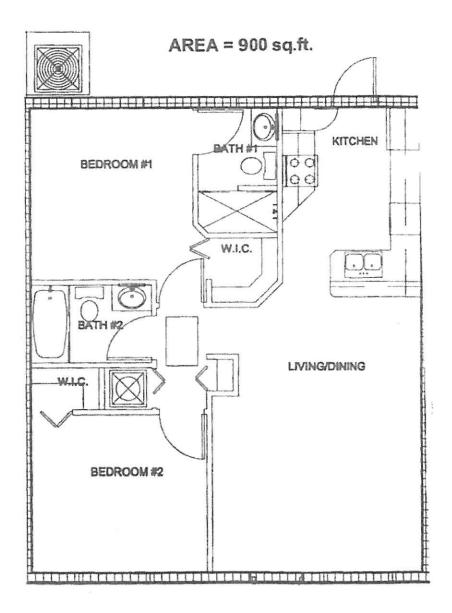
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MIRYAM JIMENEZ

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Margate Fire Rescue Annual Inspection Report

Business Name: COURT 97/21)S					
Location: 603 MEZALEVEA DR					
Date://- / \(\tau - 1 \)					
Inspection Type: Annual Local Business Tax Receipt					
Permit: Fee:					
Address required front and rear					
31. Fire extinguishing equipment requires service					
32. Fire extinguisher to be visible and accessible					
34. Sprinklers and standpipes must function properly and be certified					
50. Remove extension cords and multiple outlet devices					
54. Storage should be removed from the meter room					
60. Exit doors may not be locked while building is					
occupied					
65. Exit signs must be properly located and illuminated					
66. Emergency lighting installed or repairs needed					
72. Service to alarm system and/or devices required					
Comments: NO VIOLATIONS NOTED					
Date of Approval: 1/- 12 - 14					
Inspector: Kwissw					
1115pccto1. 7=007E3(100)					
Recipient signature:					
Re-inspection dates:					
Margate Fire Rescue 1811 Banks Road 954-971-6232					