

City of Margate DEVELOPMENT REVIEW COMMITTEE

Application for Rezoning TEXT AMENDMAN

5790 Margate Blvd., Margate, FL 33063

954-972-6454

Submittal Date (official use): BY: AP

Project Name	Northwest Medical Center	-

Address 2801 N State Road 7, Margate, FL 33063

Folio Number 48412060010 Acreage 23.8 +/-

Existing Use Medical

PLA OF TIPE REATION GOLONIAL PARK AS SHOWN ON PLAT RECORDED IN PLAT BOOK 115, PAGE 14, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA. LESS AND EXCEPT: A PORTION OF PARCEL A OF COLONIAL PARK, AS SHOWN ON PLAT RECORDED IN PLAT BOOK 115, PAGE 14, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA, DESCRIBED AS

COMMENCE AT THE NORTHWEST CORNER OF SAID PARCEL A FOR A POINT OF BEGINNING AND RUN THENCE SOUTH 89°29'09" EAST ALONG THE NORTH BOUNDARY OF SAID PARCEL A, A DISTANCE OF 452.35 FEET; THENCE SOUTH 1°02'33" EAST PARALLEL WITH THE EAST BOUNDARY OF SAID PARCEL A, A DISTANCE OF 901.80 FEET; THENCE SOUTHWESTERLY THENCE NORTH 1°02'33" WEST, A DISTANCE OF 368.94 FEET; THENCE NORTHWESTERLY ALONG A CURVE TO THE LEFT HAVING A RADIUS OF 60.00 FEET, A CENTRAL ANGLE OF 88° 26'36" AND AN ARC OF 92.62 FEET; THENCE NORTH 89°29'09" WEST, A DISTANCE OF 363.95 FEET TO AN INTERSECTION WITH THE WESTERLY BOUNDARY OF SAID PARCEL A; THENCE

Describe proposal/request in detail, including non-residential square footage and/or number of dwelling units

Request for text amendment to revise maximum allowable building height, lot coverage, and building setbacks

Chris Akers, with Littlejohn, an S&ME Company 1935 21st Ave South, Nashville, TN 37212 Phone Number Fax Number 615.385.4020 615.385.4144 Email Address cakers@smeinc.com

Property Owner Name Northwest Medical Center, Inc. Address 2801 N State Road 7, Margate, FL 33063 Phone Number 954.978-4004 Fax Number **Email Address** erica.gulrich@hcahealthcare.com

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 ½ of the Margate City Code.

* * * CUSTOMER RECEIPT City of Margate * * *

Batch ID: RRODI 9/21/16 00 Receipt no: 185599

Type SvcCd Description Amount

ECDV REZONING

1.00

\$250.00

2801 NORTH STATE ROAD 7 NORTHWEST MEDICAL CENTER

DRC #10-16-03

REZONING-TEXT AMENDMENT

FOR NORTHWEST MEDICAL CENTER

2801 NORTH STATE ROAD 7

MARGATE, FL 33063 CHRIS AKERS, WITH LITTLEJOHN,

AN S&ME COMPANY

1935 21ST AVENUE SOUTH NASHVILLE, TN 37212

615-385-4144

CAKERS@SMEINC.COM

Tender detail

CK Ref#: 3099500133

Total tendered:

Total payment:

Trans date: 9/26/16

\$250.00 \$250.00 \$250.00

Time: 17:15:07

HAVE A GREAT DAY!