

BOARD OF ADJUSTMENT  
CITY OF MARGATE, FLORIDA

BA # 02-17  
HEARING DATE 1-3-17

VARIANCE REQUEST

PART I. TO BE COMPLETED BY PETITIONER

Applicant: Chris Akers, with Littlejohn an S&ME COMPANY Date: 12/2/2016

Relationship to Subject Property: Engineering Consultant to Northwest Medical Center

Address of Property: 2801 North State Rd 7, Margate, FL, 33063

Legal Description: See attached

Describe Variance Requested: Building setback variance to encroach into the additional 10' setbacks due to the 4-story parking garage (additional 5' setback per story over 2 stories)

List Details of Hardship: The geometry of the existing parcel, location of the existing building, location of existing utilities, efficiency of the parking garage design, and budget for the additional number of parking spaces all account for the proposed location of the new garage. The initial 25' side yard and 35' front yard setbacks are being honored.

  
Signature of Applicant

Phone # (615) 385-4144

1935 21st Ave. South,  
Nashville, TN 37212  
Address

Fax# (615) 385-4020

PART II. TO BE COMPLETED BY THE ECONOMIC DEVELOPMENT DEPT.

Describe request and how it varies from the Code: \_\_\_\_\_

Section of Code involved: \_\_\_\_\_ Zoning of Property: \_\_\_\_\_

Have plans been submitted to and approved by the Building Department? \_\_\_\_\_

**PROPERTY OWNER CERTIFICATION AND PERMISSION TO PROCEED**

I hereby certify that I am the owner of the property located at 2801 North State Rd 7, Margate, FL, 33063  
being the subject property for this variance application, and I give authorization to  
Littlejohn, an S&ME Company to file this petition for the said  
variance.

Erica Gulkich  
Print owner's name

[Signature]  
Signature of owner

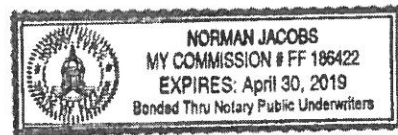
Subscribed and sworn to before me this 7<sup>th</sup> day of NOVEMBER  
202016

[Signature]  
Signature of Notary

NORMAN JACOBS  
Print or type name of Notary

☒ Personally known to me

☐ Produced identification \_\_\_\_\_



City of Margate  
\*\*\* CUSTOMER RECEIPT \*\*\*

Batch ID: RR0DI      12/06/16 00      Receipt no: 34603

Type	SvcCd	Description	Amount
EQ		ECDV MISCELLANEOUS	
	Qty	1.00	\$200.00

LITTLEJOHN, AN S&ME COMPANY  
1935 21ST AVENUE SOUTH  
NASHVILLE, TN 37212  
(615) 385-4144  
VARIANCE REQUEST BA-02-17  
NORTHWEST MEDICAL CENTER  
2801 N STATE ROAD 7  
CHRIS AKERS  
LITTLEJOHN, AN S&ME COMPANY  
ADDRESS AS ABOVE  
CAKERS@SEMINEC.COMY  
(615) 385-4144

Tender detail  
CK Ref#: 1184      \$200.00  
Total tendered: \$200.00  
Total payment: \$200.00

Trans date: 12/07/16      Time: 11:12:34

HAVE A GREAT DAY!