BOARD OF ADJUSTMENT



Sign Waiver Application

Development Services Department, 901 NW 66th Avenue, Florida 33063

OFFICE USE ONLY

BA #: _ BA - 03 - 19

Hearing Date: 7/11/2019

PART I. TO BE COMPLETED BY APPLICANT	
Name of Applicant: Creative Sign Designs	
Address of Applicant: 12801 Commodity Palce, Tampa, FL 33626	
Email:_amentry@creativesigndesigns.com	Phone: 813.749.8549
Name of Agent: Addie Mentry	
Email: amentry@creativesigndesigns.com	Phone: 813.749.8549
Address of Agent: 12801 Commodity Place, Tampa, FL 33626	
Name of Property Owner: NORTHWEST REGIONAL HOSP INC	
Address of Property Owner: 2801 N STATE ROAD 7, MARGATE FL	33063
Email: Kristen.Lindenboom@hcahealthcare.com	Phone:
PART II. PROPERTY INFORMATION:	
Address of Property: 2801 N STATE ROAD 7, MARGATE FL 3306 COLONIAL PARK 115-14 B PARCEL A LESS PT DESC AS,BE 368.94, NWLY 92.62,WLY 363.95,NLY 485 TO POB & LESS PT Legal Description: & W R/W STATE RD 7, S 588.76,W 182.43 TO POB, W 146.37	G AT NW COR OF PAR A,ELY 452.35, SLY 901.8,SWLY 31.54,NLY
Lot Size/Area: Zoning District: CF-1	Folio #: 4841 24 06 0010
Existing Use: 73 - Privately owned hospitals Proposed Use: 73 - Privately owned hospitals	rivately owned hospitals
PART III. APPLICATION REQUIRMENTS: Please submit the following	llowing to the Development Services Department:
1) Sign waiver application form with Part I - Part IV completed and signed.	
2) Legal survey with embossed seal, (1 original, stamped/sealed + 2 copies*)	and 1 electronic copy in pdf format.
/ 3) Layout or plan showing proposed changes; such as location of fence, build in pdf format required).	ing, etc. (3 paper copies and 1 electronic copy
4) PROPERTY OWNER CERTIFICATION AND PERMISSION TO PRO	OCEED form must be completed
5) Cash or Check in the amount of \$200.00 payable to: CITY OF MARGATE	ī.
6) Public hearing sign bond agreement and cash or check in the amount of \$15	50.00 payable to: CITY OF MARGATE
PUBLIC HEARING NOTICES: Per Section 31-55, at least 14 days prior to a scheduled hearing, the petitione property owners within 1,500 feet and posting public hearing signs on the pro	r is responsible for mailing public notice to all

FEE SCHEDULE:

Sign Waiver Request: \$200.00 Sign Bond: \$150.00 Reimburse City for Newspaper Ad

Proof of mailing and affidavit must be submitted at least 10 days prior to the scheduled hearing.

ATTENDEANCE AT HEARING IS MANDATORY FOR THE PETITIONER

RECEIVED JUN 1 7 2019 BY:.....

Property Owner Certification And Permission To Proceed

This is to certify that I am the owner of the prope	erty located at	
	Creative Sign Designs / Addie Mentry to make and file this application for ication is denied, I understand that I may file an appeal within 7 days Signature of Property Owner:	
Addie Mentry	Keisten Lindentam	
Print Name of Agent:	Print Name of Property Owner:	
STATE OF FLORIDA. COUNTY OF BROWALD Subscribed and sworn to before me this	29th day of MAY 2019. PATRICIA IRORERE	
Signature of Notary	Print of type name of Notary	
Personally known to me Produced identification (Notary seal)	PATRICIA IRORERE Notary Public - State of Florida Commission # FF 974569	
, - 'AA	My Comm. Expires Jul 15, 2020 Bonded through National Notary Asso.	

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PART IV. VARIANCE:
The process for requesting a sign waiver is documented in Section 39.19 of the Margate Code of Ordinances. High Atomic Fages Indicate the specific code a sign waiver is requested from and summarize the context:
The following questions must be answered to demonstrate the foundation for the sign waiver request as specifical
required by the Code of Ordinances. As the applicant, you bear the burden of proving the sign waiver criteria:
1) There is something unique about the building or site configuration that would cause the sign permitted by th code to be ineffective in identifying a use or structure that would otherwise be entitled to a sign:
2) The granting of a waiver is not contrary to the intent of the sign code, the aesthetics of the area, or does not create a nuisance or adversely affect any neighboring properties:
3) Literal enforcement of this article would result in unreasonable and undue hardship upon the petitioner:

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Part IV Variance (Wall Signs):

4) There is something unique about the building or sire configuration what would case the signed permitted by this code to be ineffective in identifying a use or structure that would otherwise be entitled to assign:

Due to the size of the campus and the multiple vantage points for emergency and vehicular traffic, the wall signage permitted by code would not be sufficient for identifying the building. The campus includes multiple building entrances for specific purposes such as emergency entrances for emergency vehicles, emergency entrances for patients and family, etc.

5) The granting of a waiver is not contrary to the intent of the sign code, the aesthetics of the area, or does not create a nuisance or adversely affect any neighborhood properties:

The existing and proposed signage would not be contrary to the intent of the signage code. The signage is meant to concisely advertise the hospital and the intent of the signage is not to take create a nuisance or adversely affect the surround areas. The signage is intended to highlight the proper use of the building's configuration.

6) Literal enforcement of this article would result in unreasonable and undue hardship upon the petitioner.

Enforcement of the current signage code would certainly pose an impact to the community and the patients that we serve. Given the nature of the business, it is crucial that patients in destress and community members can effectively and easily navigate the campus so as to not delay urgent medical care.

Part IV Variance (Monuments):

1) There is something unique about the building or sire configuration what would case the signed permitted by this code to be ineffective in identifying a use or structure that would otherwise be entitled to assign:

Given the size and number of entry points to our campus, the signage permitted by code would be ineffective for appropriately directly patients and family members to the appropriate building and/or facility entrance.

2) The granting of a waiver is not contrary to the intent of the sign code, the aesthetics of the area, or does not create a nuisance or adversely affect any neighborhood properties:

The proposed monument sign conforms with existing monument signage on campus and therefore would not adversely affect any neighboring properties.

3) Literal enforcement of this article would result in unreasonable and undue hardship upon the petitioner.

Enforcement of this signage code would certainly pose an impact to the community and the patients that we serve. Given the nature of our service, it is imperative that patients/community members are able to effectively and easily navigate the campus so as to not delay important medical care.

PART V. TO BE COMPLETED AFTER BOARD OF ADJUSTMENT ACTION. Board Action: Approved_____ Denied____ Tabled to:_____ List Any Special Conditions: Chairman of the Board of Adjustment Date Secretary of the Board of Adjustment Date

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PUBLIC HEARING SIGN REMOVAL BOND AGREEMENT

I, Addie Mentry	, petitioner of record	
and on behalf of the property owner, hereby agree that the subject public hearing sign shall be		
removed within two (2) business days following a final determination by the governing body.		
Further, it is understood that by complying with this section, the \$150 cash bond will be		
returned to the petitioner of record.		
If said public hearing sign is not removed in two (2) business days, I hereby authorize the		
administration of the City of Margate to remove said sign, billing the costs of the removal of the		
sign to the owner of the property.		
I understand that the \$150 (one hundred fifty dollar) cash bond shall 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.		
Northwest Medical Contra	OFFICE USE ONLY	
Northwest Medical Center	Date of Decision:	
Business Name	Tabled to date certain:	
2801 N STATE ROAD 7, MARGATE FL 33063	Two Business Days (after decision):	
Street location	COMPLIED: Yes No	
K. Lend	COMPLIED: Yes No If YES, initiate check request to Finance	
Signature	(601- 0000-220.18-00)	
	If NO, inform Finance to deposit Bond	
5/40/10	(001-0000-369.90-01)	
Date		

Copy to Petitioner, Finance Department Original to File

I,

*** CUSTOMER RECEIPT City of Margate **

Batch ID: MMILLER 6/18/19 00 Receipt no: 132260

Type SvcCd Description ECDV MISCELLANEOUS Amount

Qty 1.00 \$200.00

EΒ ECDV BANNERS

1.00

\$150.00

Qtу

SIGN WAIVER APPLICATION

SIGN BOND

12801 COMMODITY PLACE CREATIVE SIGN DESIGNS, LLC

TAMPA, FLORIDA 33626

AGENT: ADDIE MENTRY

Tender detail

CK Ref#: 98278 \$200.00

Total tendered: CK Ref#: 92876 \$150.00 \$350.00

Total payment: \$350.00

Trans date: 6/17/19 Time: 9:06:33

HAVE A GREAT DAY!