



City of Margate
DEVELOPMENT REVIEW COMMITTEE
Application for Rezoning

5790 Margate Blvd., Margate, FL 33063
954-972-6454

Submittal Date (official use):

| | | |
|---|-------------------------------------|-------|
| Project Name Margate Care for Heroes, LLC | | |
| Address 603 Melaleuca Drive, Margate, FL 33063 | | DRC # |
| Acreage 1.06 | Folio Number 4841 36 02 0350 | Paid: |
| Existing Use Long Term Care Facility | | |
| Legal Description Hammon Heights Sec 2 34-46 B LOTS 1 & 2, TOG/W LOT 3, ALL IN BLK 3 | | |
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Describe proposal/request in detail, including non-residential square footage and/or number of dwelling units

Change of zoning to CF-1 to allow Medical Rights in a I-2 Building. This property was converted from a 10 unit apartment building to a Long Term Care Facility. Permit 15-00001248 4/26/16, CO 3/30/2017.

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|--|--------------------------------|
| Agent/Contact Name Margate Care for Heroes, LLC | |
| Address 5379 Lyons Rd. Suite 154, Coconut Creek, FL 33073 | |
| | |
| Phone Number 954 608 4067 | Fax Number 954 420 0731 |
| Email Address miryamjimenez@vaqualityoflife.com | |

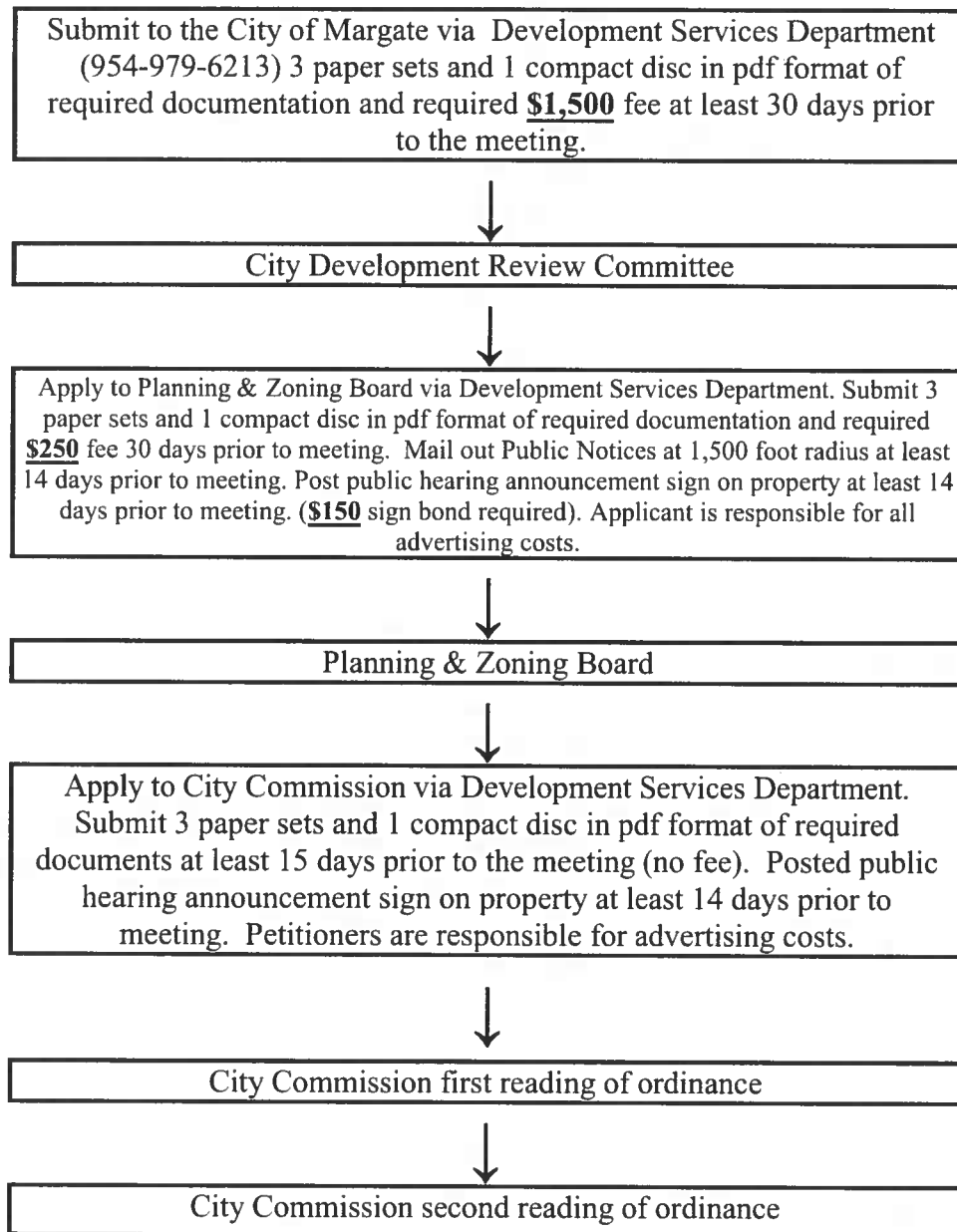
| | |
|--|--------------------------------|
| Property Owner Name | |
| Address | |
| 603 Melaleuca Drive, Margate FL 33063 | |
| Phone Number 954 608 4067 | Fax Number 954 420 0731 |
| Email Address miryamjimenez@vaqualityoflife.com | |

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.


Property Owner's Signature

5-28-20
Date

CITY OF MARGATE REZONING APPROVAL PROCEDURES



*Rezoning to PUD has additional requirements. Call City Planner for more information (954-972-6213).

To access the Margate Code of Ordinances on-line:

1. Go to www.municode.com
2. Click on "Code Library"
3. Where it directs, "Select State," select Florida.
4. Scroll down to "Margate" and click on it.
5. Click on "Margate Code of Ordinances"
6. From this page, you have the following options:
 - a. Enter a word to search for in the Code (will search entire code). If you enter a search word, municode will bring up appropriate sections of the Code. If you click on one of those sections and wait for it to fully load, it will take you to the first instance of your search word and your search word will always be highlighted.
 - b. Use the menu on the left to find a specific chapter of the Code
 - c. If you want only the ZONING CODE, go to the menu on the left-hand side of the page and scroll down until you see "Appendix A Zoning" and click on it.

Application submissions will be considered incomplete without all of the following required materials:

1. Completed DRC application forms.
2. Application fee.
3. Justification statement for re-zoning.
4. Survey of subject property depicting current conditions and that is no more than five years old.

NOTES:

1. 3 paper sets of back up material (1 original + 2 copies) and 1 compact disc in pdf format must be submitted with 1 original application cover sheet (p.1) to the Development Services Department at least 30 days prior to DRC meeting.
2. The applicant or authorized representative must be present in order for a submission to be reviewed by the committee.
3. All required forms/materials must be typewritten or printed neatly. Illegible documents will not be accepted.
4. Large (24" x 36") surveys and/or plans must be folded into quarters, and then in half with the application visible.
5. Completed "APPLICATION FOR REZONING PETITION", 3 paper sets of required back-up material and 1 compact disc in pdf format, **\$250** application fee, and completed "PUBLIC HEARING SIGN REMOVAL BOND" with **\$150** sign bond for Planning & Zoning Board must be submitted to the Development Services Department after the DRC meeting and at least 30 days prior to Planning & Zoning Board meeting. Post public hearing announcement sign on property at least 14 days prior to meeting. Mail out Public Notices at 1,500 foot radius at least 14 days prior to meeting. Applicants are also responsible for cost of required advertisements.
6. 3 paper sets of required back-up material and 1 compact disc in pdf format must be submitted to the Development Services Department after the Planning & Zoning Board meeting and at least 15 days prior to City Commission meeting. Applicants are responsible for cost of required advertisements. Post public hearing announcement sign on property at least 14 days prior to meeting.

DRC APPLICATION FEE(S):

1. \$1,500 Rezoning



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

I, Miryam Jimenez, 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.

Margate Care for Heroes LLC
Business Name

603 Melaleuca Drive, Margate, FL 33063

Address

Signature

5-28-20

Date

OFFICE USE ONLY

Date of Decision: _____

Tabled to date
certain? _____

Two Business Days (after
decision) _____

COMPLIED? Y N

If YES, initiate check request to Finance (603-0000-220.18-00)

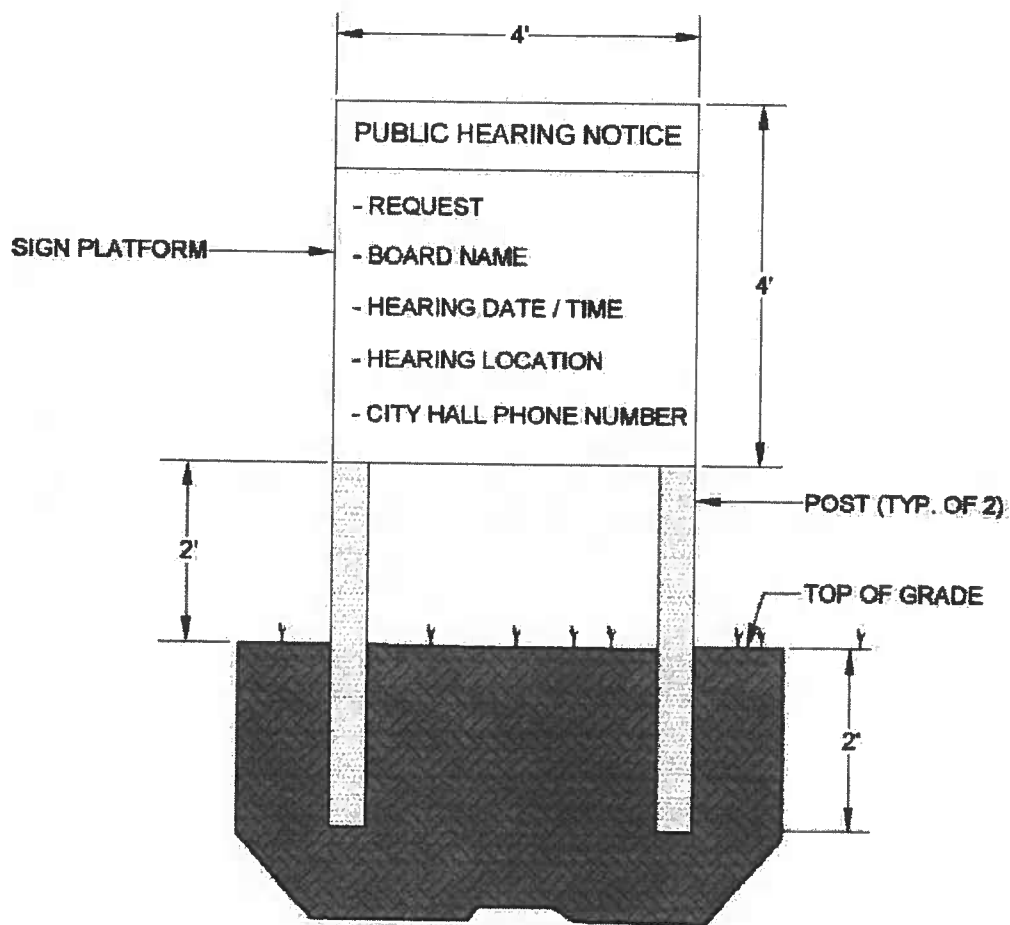
If NO, inform Finance to deposit Bond (001-0000-369.90-01)

CITY OF MARGATE

Public Hearing Announcement Sign Specifications

The sign must:

- Be professionally prepared.
- Be placed adjacent each right-of-way frontage, facing the road.
- Be installed 5 feet back from the property line.
- Be installed on property 14 days prior to scheduled public hearing.
- Be designed in accordance with Section 31-55(B)(2) of the Margate Code of Ordinances, as depicted below, and Section 31-55(B)(4).
- Display "954-972-6454" for the City Hall phone number.
- Display "5790 Margate Boulevard, Margate" for the hearing location.



PROPERTY OWNER CERTIFICATION AND PERMISSION TO PROCEED



I hereby certify that I am the owner of the property located at 603 Melaleuca Drive, Margate, FL 33063,
being the subject property for this REZONING application, and I give authorization to
Attorney Kyle Teal to file this petition for the said land use plan amendment.

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 31 of the Margate City Code.

Miryam Jimenez
Print owner's name

[Signature]
Signature of owner

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization,
this 6 day of June, 2022 (year), by Miryam Jimenez (name of person making statement).

Julian Loli
Print or type name of Notary

[Signature]
Signature of Notary

☐ Personally known to me

☒

Produced identification

Florida Driver License



CITY OF MARGATE



CITY OF
MARGATE
Together We Make It Great

APPLICATION FOR REZONING PETITION

| | | |
|---|-------------------------------------|-------------------------------|
| Petitioner Margate Care for Heroes, LLC | | (official use) PZ # |
| Project Name Margate Care for Heroes, LLC | | |
| Address 603 Melaleuca Drive, Margate, FL 33063 | | |
| Acreage 1.06 | Folio Number 4841 36 02 0350 | |
| Existing Zoning R-3 | | Requested Zoning CF-1 |
| Legal Description Hammon Heights Sec 2 34-46 B LOTS 1 & 2, TOG/W LOT 3, ALL IN BLK 3 | | |
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|-------------------------------------|
| Justification for requested zoning: |
| See attached |
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NOTE: Eleven (11) copies of supporting data/plans must be submitted as well. Fee is **\$250.00**. Petitioner will also be responsible for cost of advertisements and notification mailings.

Signature of Petitioner

Margate Care for Heroes, LLC

Company Name

603 Melaleuca Drive

Margate FL 33063

Address

954-608-4067

Phone Number

n/a

Fax Number



Waiver of Florida Statutes Section 166.033, Development Permits and Orders

Applicant: Miryam Jimenez

Agent/Authorized Representative: Kyle Teal

Project Address: 603 Melaleuca Drive, Margate FL 33063

Project Name: Margate Care for Heroes

Date: June 11, 2020

I, Kyle Teal (print Agent/Authorized Representative
name), on behalf of Miryam Jimenez (print Applicant name),

hereby waive the deadlines and/or procedural requirements of Florida Statute Section 166.033 as the provisions of said statute apply to the above referenced application, including, but not limited to the following:

- 1) 30-day requirement for Applicant Response to Staff determination of incompleteness as described in DRC Comments and/or Letter to Applicant; and
- 2) 30-day Staff review of Applicant Response to DRC Comments and/ or Letter to Applicant; and
- 3) Limitation of three (3) Staff Requests for Additional Information; and
- 4) Requirement of Final Determination on Applicant's application approving, denying, or approving with conditions within 120 or 180 days of the determination of incompleteness, as applicable.

Signature of Applicant or Applicant's Authorized Representative

Kyle Teal

Name of Applicant/ Authorized Representative