



**APPLICATION FOR PLAT EXEMPTION**  
**DIVISION OF LOT**

**PLANNING AND ZONING DIVISION**

SUBMIT ALL

Section 1: **General Application Requirements**

HELPFUL INFORMATION

Section 2: **Submittal Requirements**

Section 3: **Development Review Committee (DRC) Information**

*City of*  
**Miramar**

**Community Development Department**

2200 Civic Center Place

Miramar, Florida 33025

(954) 602-3264

[www.ci.miramar.fl.us](http://www.ci.miramar.fl.us)

## SECTION 1: GENERAL REQUIREMENTS

**INSTRUCTIONS:** Please print or type all information. The application must be filled out accurately and completely. Answer all questions. Do not leave an item blank. If an item does not apply, write N/A (Not Applicable). Please include the items listed in Section 2 of the application.

**DEVELOPMENT REQUEST** – Check one type **ONLY** (Use separate applications if applicable)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Abandonment/Vacation of Right-of-Way or Easement | <input type="checkbox"/> Land Development Code Amendment | <input type="checkbox"/> Plat Waiver   |
| <input type="checkbox"/> Appeal of decision/determination                 | <input type="checkbox"/> Land Use Plan Map Amendment     | <input type="checkbox"/> Rezoning      |
| <input type="checkbox"/> Community Appearance Board                       | <input type="checkbox"/> Master Development Plan (PUD)   | <input type="checkbox"/> Site Plan     |
| <input type="checkbox"/> Comprehensive Plan Text Amendment                | <input type="checkbox"/> Master Zoning Plan              | <input type="checkbox"/> Temporary Use |
| <input type="checkbox"/> Conditional Use                                  | <input type="checkbox"/> Plat                            | <input type="checkbox"/> Variance      |
| <input type="checkbox"/> Developer’s Agreement                            | <input type="checkbox"/> Plat Delegation Request         | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Development of Regional Impact (DRI)             | <input type="checkbox"/> Plat Exemption                  |  |

**DEVELOPMENT/PROJECT NAME:** \_\_\_\_\_

**DEVELOPMENT / PROJECT ADDRESS OR LOCATION:** \_\_\_\_\_

Legal Description (*attach separate sheet if necessary*): \_\_\_\_\_

All Tax ID Folio Numbers: \_\_\_\_\_

**Project Narrative** (*Please attach as a separate sheet*)

Residential Use(s)/Unit Type(s): \_\_\_\_\_

Number of Residential Units: \_\_\_\_\_

Non-Residential Use(s) (Type & sq. ft.): \_\_\_\_\_

Current Use(s) of Property: \_\_\_\_\_

Proposed Use(s) of Property: \_\_\_\_\_

Is the property platted?      Yes      No

OR Book & Page: \_\_\_\_\_

Plat Name: \_\_\_\_\_

Is the property an existing legal lot of record?      Yes      No

If no, please explain on a separate sheet.

Site Area (sq. ft. & acres): \_\_\_\_\_

**Existing** Zoning Designation(s): \_\_\_\_\_

**Proposed** Zoning Designation(s): \_\_\_\_\_

**Existing** Land Use Designation(s): \_\_\_\_\_

**Proposed** Land Use Designation(s): \_\_\_\_\_

Will the plat be affected by this application?      Yes      No

If yes, please explain on a separate sheet.

Is the property the subject of code enforcement action?

Yes      No

If yes, code enforcement case no.: \_\_\_\_\_

<b>PROPERTY OWNER NAME:</b>		<b>SIGNATURE:</b>	
Address:			
Telephone:	Fax:	E-mail:	
<input type="checkbox"/> Proof of Ownership (Submit Warranty Deed/Tax Record)			
<b>NOTARIZATION</b>			
STATE OF FLORIDA/COUNTY OF _____			
The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____			
<u>(Signature of Notary Public - State of Florida)</u>			
<u>(Print, Type, or Stamp Commissioned Name of Notary Public)</u>			
Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____			

<b>CONTRACT PURCHASER NAME:</b>		<b>SIGNATURE:</b>	
Address:			
Telephone:	Fax:	E-mail:	
<input type="checkbox"/> Proof of Ownership (Submit Warranty Deed/Tax Record)			
<b>NOTARIZATION</b>			
STATE OF FLORIDA/COUNTY OF _____			
The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____			
<u>(Signature of Notary Public - State of Florida)</u>			
<u>(Print, Type, or Stamp Commissioned Name of Notary Public)</u>			
Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____			

<b>TENANT NAME:</b>		<b>SIGNATURE:</b>	
Address:			
Telephone:	Fax:	E-mail:	
<input type="checkbox"/> Proof of Ownership (Submit Warranty Deed/Tax Record)			
<b>NOTARIZATION</b>			
STATE OF FLORIDA/COUNTY OF _____			
The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____			
<u>(Signature of Notary Public - State of Florida)</u>			
<u>(Print, Type, or Stamp Commissioned Name of Notary Public)</u>			
Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____			

<b>AGENT NAME:</b>		<b>SIGNATURE:</b>	
Address:			
Telephone:	Fax:	E-mail:	
<input type="checkbox"/> Proof of Ownership (Submit Warranty Deed/Tax Record)			
<b>NOTARIZATION</b>			
STATE OF FLORIDA/COUNTY OF _____			
The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____			
<u>(Signature of Notary Public - State of Florida)</u>			
<u>(Print, Type, or Stamp Commissioned Name of Notary Public)</u>			
Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____			

**APPLICATION FOR PLAN REVIEW SERVICES  
(Optional; Cost Recovery Review)**

**APPLICANT:** \_\_\_\_\_

**PROJECT:** \_\_\_\_\_

APPLICANT hereby requests CITY to utilize the cost recovery plan/permit review services provided by Ordinance No. 97-39 of the City of Miramar, Florida. In electing the cost recovery procedure, the APPLICANT will benefit from an expedited review of the project application. The APPLICANT understands and agrees that APPLICANT will be responsible for all costs and expenses incurred by the CITY's consultant(s) in reviewing such project, plus a 10% administration fee and a 7% surcharge. A minimum initial deposit is required. APPLICANT has deposited with the CITY the sum of \$\_\_\_\_\_, which shall be applied to the review cost and expenses incurred and which shall be replaced upon notice from CITY that such funds have been expended.

APPLICANT understands and agrees that any decision concerning compliance with any applicable codes and regulations is solely within and reserved to the authority of CITY employees and the City Commission, as provided by law. CITY reserves the right to review, modify and/or revise, in its sole discretion, any work performed by cost recovery consultants. APPLICANT understands and agrees that the above-referenced consultant shall work solely under the supervision and direction of CITY staff.

This document shall be executed by the owner and/or the agent that has signed the application on pages 3 or 4.

<b>APPLICANT SIGNATURE</b>	
<b>Sign Name:</b>	_____
<b>Print Name:</b>	_____
<b>Title:</b>	_____
<b>Date:</b>	_____

**SECTION 2: SUBMITTAL REQUIREMENTS**  
**PLAT EXEMPTION – DIVISION OF LOT OR PARCEL**  
**(Land Development Code Section 509.11)**

1. A pre-application conference with staff required prior to submittal
  2. Completed application form with all signatures notarized. If applicant is the contract purchaser, include copy of contract. *(Privileged information, such as the sale price, may be covered up)*
  3. Specify type of Plat Exemption requested:
    - ( ) a. The division of a RM-10 zoned lot to permit individual ownership in conformance with all applicable zoning and building code provisions *(LDC Section 509.11.3)*
    - ( ) b. The division of a non-residential parcel into not more than six parcels, when the City determines that a new public right-of-way or parcel access is not required *(LDC Section 509.11.6)*
  4. Narrative (explanation of project, justification, and historical background if known)  
State fully the grounds for, and all facts relied upon, in support of the application.
  5. Certificate of Title
  6. Consent of Mortgage Holder, if applicable
  7. Tax letter or receipt from the Broward County Revenue Collection Division
  8. Application Fee:
 

Residential	<b>\$1,605</b>	(\$1,500 + \$105 (7% surcharge))
Non-residential	<b>\$1,605</b>	(\$1,500 + \$105 (7% surcharge))
	<b>PLUS</b>	
Legal Cost Recovery:	<b>\$150</b>	
Engineering Review Fee:	<b>Refer to Schedule of Engineering Fees Document</b>	
  9. Cost recovery deposit **\$1,000**, if applicable
  10. Survey dated within one year of date of submittal that accurately reflects current site conditions  
**At least one survey must be signed and sealed, the others may be copies.**
  11. Subdivision plan containing all proposed plot lines and plot areas (in square feet). The plans must contain a location map, signature block for the City Engineer and the Community Development Director, and should reference an attached cross indexing of plot titles to metes and bounds description of all plots within the plat.
- The following are required IF directed by staff**
12. Master parking plan
  13. Secondary access plan
  14. Schematic Engineering Plan (Paving, Grading, and Drainage)
  15. Sewer and water plans
  16. Alley, access, drainage, utility, landscape or other easements
  17. Letters from all utilities franchised to operate in the City of Miramar relative to adequacy of proposed easements shown in the plat, including approval of shared easements

**A minimum of 3 sets of the foregoing information must be submitted;  
5 if you choose the Cost Recovery review option**

**JOINDER, CONSENT AND SUBORDINATION**

The undersigned hereby certifies that \_\_\_\_\_, is the holder of a mortgage, lien or other encumbrance upon the above-described property, and that the undersigned hereby joins in and consents to the Plat Waiver by the owner thereof and agrees that its mortgage, lien or other encumbrance, which is recorded in Official Records Book \_\_\_\_\_, Page \_\_\_\_\_, of the Public Records of Broward County, Florida, shall be subordinated to the foregoing agreement.

Signed, sealed and delivered  
in the presence of:

\_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Name: \_\_\_\_\_

Its: \_\_\_\_\_

\_\_\_\_\_

Print Name: \_\_\_\_\_

(CORPORATE SEAL)

STATE OF \_\_\_\_\_ )

SS:

COUNTY OF \_\_\_\_\_ )

**THIS IS TO CERTIFY**, that on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ before me, an officer duly authorized to take acknowledgements in the State and County aforesaid, personally appeared \_\_\_\_\_ as \_\_\_\_\_ of \_\_\_\_\_, who [ ] is personally known to me or [ ] produced \_\_\_\_\_ as identification.

\_\_\_\_\_

NOTARY PUBLIC STATE OF \_\_\_\_\_

Print Name: \_\_\_\_\_

Commission No.: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

**SECTION 3: DEVELOPMENT REVIEW COMMITTEE (DRC)**

1. **Pre-application meeting:** Contact the Community Development Department at (954) 602-3264 to schedule a pre-application meeting.
2. **Application Intake:** DRC meetings occur bi-monthly, usually on a Thursday morning. New submittals will only be accepted by appointments on the Monday prior to the DRC meeting. Resubmittals are accepted by appointments on the Tuesday prior to the DRC meeting in the **morning only**. Please contact the DRC Plans Coordinator at (954) 602-3269 to schedule an appointment. See our Meeting Calendar: <http://www.commdev.miramar-fl.gov/calendar.htm>
3. **Review by DRC members:** The following Departments / Divisions review DRC applications:

<b>PLANNING DIVISION</b>		
(954) 602-3264		
<b>BUILDING</b> (954) 602-3201	<b>FIRE</b> (954) 602-4600	<b>PUBLIC WORKS</b> (954) 538-6814
<b>COMMUNITY SERVICES</b> (954) 538-6804	<b>LANDSCAPING</b> (954) 602-3260	<b>TRAFFIC</b> (954) 602-3319
<b>ENGINEERING</b> (954) 602-3320	<b>POLICE</b> (954) 602-4000	<b>UTILITIES</b> (954) 538-6828
<b>EXTERNAL AGENCIES</b>		
<b>BROWARD COUNTY MASS TRANSIT</b> (954) 357-8351	<b>SOUTH BROWARD DRAINAGE DISTRICT</b> (954) 680-3337	

4. **DRC Approval Meetings:** The DRC generally meets twice a month on Thursday mornings, excluding holidays. A project may be postponed a maximum of six (6) months. Additional postponements require the approval of the Assistant Director. *Note: DRC Approval is required at least 4 weeks prior to City Commission Hearing.*
5. **Resubmissions:** Applications that are not approved may require submittal of new or revised materials to resolve outstanding issues. These applications will then be considered at the next DRC meeting, or at a subsequent DRC meeting as determined by Staff or as requested by the applicant.

# HELPFUL CONTACTS

UTILITY COMPANIES	SITE PLAN & PLAT REVIEWS
<p>The Utility companies listed below should be contacted for <b>easement and right-of-way issues.</b></p>	<p>The agencies and companies listed below should be contacted for <b>site plan and/or plat review.</b></p>
<p><b>Comcast</b>            2501 S.W. 145<sup>th</sup> Avenue            Miramar, FL 33027            Charlene Reagan - Phone: (954) 534-7440</p>	<p><b>All Service Refuse</b>            751 Northwest 31<sup>st</sup> Avenue            Fort Lauderdale, FL 33311            Ralph Trapani - Phone: (954) 583-1830            email: <a href="mailto:Trapanir@repsrvsouth.com">Trapanir@repsrvsouth.com</a></p>
<p><b>Bell South</b>            8601 West Sunrise Boulevard            Plantation, Florida 33322            Evan Bewry            Phone: (954) 423-6296            Fax: (954) 423-6533</p>	<p><b>Broward County Mass Transit</b>            Broward County Mass Transit Division (BCT)            3201 W. Copans Road            Pompano Beach, FL 33069            David Daniels - E-mail: <a href="mailto:dadaniels@broward.org">dadaniels@broward.org</a>            Phone: (954) 357-8351 - Fax: (954) 357-8342</p>
<p><b>NUI – Florida City Gas</b>            9555 E. 25<sup>th</sup> Street            Hialeah, FL 33013            Ramiro Sicre            Phone: (305) 835-3610            E-mail: <a href="mailto:rsicre@agl.resources.com">rsicre@agl.resources.com</a></p>	<p><b>South Broward Drainage District (SBDD)</b>            6591 S.W. 160<sup>th</sup> Avenue (Dykes Road)            Davie, FL 33331            Leo Schwartzberg, Director            Phone: (954) 680-3337 Cell: (954) 658-1989            Fax: (954) 680-3339</p>
<p><b>FPL - Florida Power and Light Company</b>            4000 Davie Road Extension            Hollywood, Florida 33024            Phone: (954) 442-6350            Fax. (954) 442-6340</p>	<p><b>U.S. Post Office</b> (per site location)</p> <ul style="list-style-type: none"> <li>▪ <b>Between U.S. 441 and Utopia Drive:</b>              810 S. State Road 7, Hollywood, FL 33023              Barbara Moore - Phone: (954) 894-6691</li> <li>▪ <b>Between Utopia Drive and Flamingo Road</b>              Pines Annex:              12277 Pembroke Rd, Pembroke Pines FL 33025              Ida Jauregui - Phone: (954) 441-7729</li> <li>▪ <b>Vicky Coceano Miramar Branch:</b>  <b>Between Flamingo Rd and S.W. 172<sup>nd</sup> Ave.</b>              14900 S.W. 30<sup>th</sup> Street, Miramar, FL 33027              Carol Lima - Phone: (954) 704-8993</li> <li>▪ <b>Chapel Lakes Branch: West of S.W. 172 Ave</b>              21001 Pines Boulevard, Pembroke Pines, FL 33029              Jeanie Brown - Phone: (954) 433-1644</li> </ul>
<p>THIS IS A COMPREHENSIVE LIST OF EXTERNAL AGENCIES THAT REVIEW AND APPROVE SPECIFIC APPLICATIONS. CONTACT INFORMATION IS SUBJECT TO CHANGE.</p>	