

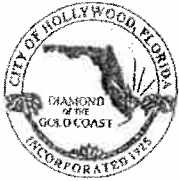
OFFICE OF PLANNING



File No. (to be filled by the Office of Planning): _____

2600 Hollywood Boulevard Room 315
Hollywood, FL 33022

GENERAL APPLICATION



Tel: (954) 921-3471
Fax: (954) 921-3347

This application must be completed in full and submitted with all documents to be placed on a Board or Committee's agenda.

The applicant is responsible for obtaining the appropriate checklist for each type of application.

Applicant(s) or their authorized legal agent must be present at all Board or Committee meetings.

At least one set of the submitted plans for each application must be signed and sealed (i.e. Architect or Engineer).

Documents and forms can be accessed on the City's website at http://www.hollywoodfl.org/comm_planning/appforms.htm



APPLICATION TYPE (CHECK ONE):

- Development Review Board Historic Preservation Board
- Planning and Zoning Board Technical Advisory Committee
- City Commission

Date of Application: _____

Location Address: corner of Sheridan St. and 52nd Avenue (Sheridan Plaza)

Lot(s): n/a Block(s): 29 & 30 Subdivision: Emerald Hills Plat

Folio Number(s): 5142 0608 4890

Zoning Classification: C-3 Land Use Classification: Commercial

Existing Property Use: Shopping Center Sq Ft/Number of Units: 361,722*

Is the request the result of a violation notice? () Yes No If yes, attach a copy of violation.

Has this property been presented to the City before? If yes, check all that apply and provide File Number(s) and Resolution(s). Koh's TD BANK (two most recent)

- Economic Roundtable Technical Advisory Committee Development Review Board
- Planning and Zoning Board Historic Preservation Board City Commission

Explanation of Request: special exception to allow a day care use in existing tenant space.

Number of units/rooms: n/a Sq Ft: 6,653**

Value of Improvement: _____ Estimated Date of Completion: April, 2010

Will Project be Phased? () Yes No If Phased, Estimated Completion of Each Phase _____

Name of Current Property Owner: Equity One (Sheridan Plaza), LLC

Address of Property Owner: 1600 NE Miami Gardens Dr., Miami, FL 33179

Telephone: 305-947-1664 Fax: _____ Email Address: slieberman@equityone.net

Name of Consultant (Representative/Tenant (circle one)): Rod A. Feiner, Esq.

Address: 1404 S. Andrews Ave., Ft. Lauderdale, FL 33316 Telephone: 954-761-3636

Fax: 954-761-1818 Email Address: rafeiner@coker-feiner.com

Date of Purchase: 07/14/03 Is there an option to purchase the Property? Yes () No ()

If Yes, Attach Copy of the Contract

List Anyone Else Who Should Receive Notice of the Hearing n/a

Address: _____

Email Address: _____

*total Shopping center, not including out parcels.

** actual tenant space.