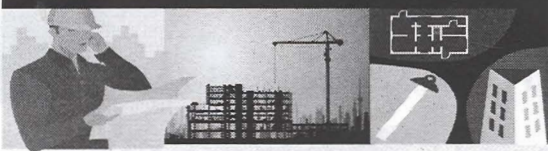


OFFICE OF PLANNING



2600 Hollywood Boulevard Room 315
Hollywood, FL 33022

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

08-DPY-31

JUL 8 '09 AM 10:41

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: 6130 VAN BUREN STLot(s): 25, 26, + 27 Block(s): - Subdivision: LYNDON PARKFolio Number(s): 0-2Zoning Classification: OFFICE - MRPD Land Use Classification: OFFICE - MRPDExisting Property Use: VACANT BLDGS Sq Ft/Number of Units: 0 - 4580⁺ PROPOSED TOTAL

Is the request the result of a violation notice? () Yes (X) 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): _____

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

Explanation of Request: CONVERT (2) RESIDENCES TO NEW CHURCH AND STORAGE BLDGNumber of units/rooms: _____ Sq Ft: 4580⁺ TOTAL - NEW + EXISTINGValue of Improvement: \$ 350,000 Estimated Date of Completion: 12 MONTHS

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

Name of Current Property Owner: NEW LIFE PENTECOSTAL CHURCHAddress of Property Owner: 6130 VAN BUREN ST.Telephone: 954 868 4796 Fax: 954 989 3939 Email Address: _____Name of Consultant/Representative/Tenant (circle one): GRAHAM GERALDS - ARCHITECTAddress: 2849 RAVENSWOOD RD Telephone: 954-581-6922Fax: 9-581-6975 Email Address: _____Date of Purchase: 2004 Is there an option to purchase the Property? Yes () No (X)

If Yes, Attach Copy of the Contract.

List Anyone Else Who Should Receive Notice of the Hearing: _____

Address: _____

Email Address: _____

OFFICE OF PLANNING

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