

OFFICE OF PLANNING



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

10-DP-75

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: 4053 S. Surf Rd

Lot(s): See Attached Block(s): See Attached Subdivision: _____

Folio Number(s): 514226010130

Zoning Classification: PD Land Use Classification: _____

Existing Property Use: Vacant Sq Ft/Number of Units: _____

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: Vacant Land to Residential

Number of units/rooms: 49 Sq Ft: 115,000

Value of Improvement: \$15,000,000 Estimated Date of Completion: 12/2012

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

Name of Current Property Owner: PRH-SIAW Hollywood, LLC

Address of Property Owner: 315 S. Biscayne Blvd, 4th Flr

Telephone: 305-460-9900 Fax: 305-513-5800 Email Address: efordin@realtelgroup.com

Name of Consultant/Representative/Tenant (circle one): _____

Address: See below Telephone: _____

Fax: _____ Email Address: _____

Date of Purchase: _____ 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: Alan Koslow, Sandy Peaceman

Koslow Address: 8085 NW 155th St., Miami Lakes, FL

3111 Sterling Rd Email Address: SPCEE@

A. Lande, Jr., Fl. 33312 BellSouth.net 33016

a.koslow@becker-polakoff.com