

MAR 22 '10 PM 2:41

OFFICE OF PLANNING



File No. (to be filled by the Office of Planning): 10FC-18

GENERAL APPLICATION

2600 Hollywood Boulevard Room 315  
Hollywood, FL 33022



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](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: March 16, 2010

Location Address: 1900 Hollywood Blvd - Hollywood

Lot(s): 25 Block(s): 25 Subdivision: Hollywood 1-21B

Folio Number(s): 5142 15 01 4700

Zoning Classification: HPOD Land Use Classification: Historic Hollywood Business

Existing Property Use: Commercial 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: Review by Historic Preservation Board for Facade Renovation

Number of units/rooms: N/A Sq Ft: N/A

Value of Improvement: 150,000.00 Estimated Date of Completion: 10/2010

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

Name of Current Property Owner: Zahava Halpern Residuary Tr.

Address of Property Owner: 1500 SOUTH OCEAN DRIVE, UNIT # 14-K

Telephone: (954) 559-6899 Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Consultant/Representative/Tenant (circle one): JOSEPH B. KALLER

Address: 2417 HOLLYWOOD BLVD. Telephone: (954) 920-5746

Fax: (954) 926-2841 Email Address: JOSEPH@KALLERARCHITECTS.COM

Date of Purchase: 1-19-1979 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: Sarah Bault

Address: P.O. Box 100

Greenvale New York Email Address: \_\_\_\_\_

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