

IMPORTANT NOTICE TO APPLICANT:
Make check for the total Processing Fee Payable to: Board of County Commissioners.

FOR OFFICIAL USE ONLY:

Agenda Date: 8-17-12
Tentative No.: T-23297-1-NEW
Received Date: 8-7-12

FEES:
P.W.W.M. _____ \$1,872.00
Plus \$10.90 per site in excess of 6 sites _____ \$0.00
P.E.R.A. _____ \$210.00
PRINT **\$2,082.00**

Concurrency Review Fee (*6.00% of Sub-Total) -- \$124.92 *Not applicable within Municipalities
AMOUNT FOR TENTATIVE OUTSIDE MUNICIPALITIES=> **\$2,206.92** <<====AMOUNT FOR TENTATIVE WITHIN UNINCORPORATED MIAMI-DADE COUNTY

APPLICATION FOR PLAT OF SUBDIVISION DEVELOPMENT

Municipality: UNINCORPORATED MIAMI-DADE COUNTY Sec.: 32 Twp.: 53 S. Rge.: 40 E. / Sec.: _____ Twp.: _____ S. Rge.: _____ E.

1. Name of Proposed Subdivision: FONTAINEBLEAU WEST-NORTH REPLAT TWO

2. Owner's Name: Fontainebleau Single Family Homes West, LLC Lakes LLC Phone: 786-437-8664

Address: 3470 NW 82nd Ave. Suite 988 City: Doral State: FL Zip Code: 33122

Owner's Email Address: mcruz@shomagroup.com

3. Surveyor's Name: Pulice Land Surveyors, Inc. Phone: 954-572-1777

Address: 5381 Nob Hill Rd. City: Sunrise State: FL Zip Code: 33351

Surveyor's Email Address: jane@pulicelandsurveyors.com

4. Folio No(s): 30-3055-0250-92 / _____ / _____

5. Legal Description of Parent Tract: See attached

6. Street boundaries: _____

7. Present Zoning: R04m Zoning Hearing No.: _____

8. Proposed use of Property:
Single Family Res. (2 Units), Duplex (_____ Units), Apartments (_____ Units), Industrial/Warehouse (_____ Square .Ft.),
Business (_____ Sq. Ft.), Office (_____ Sq. Ft.), Restaurant (_____ Sq. Ft. & No. Seats _____), Other (_____ Sq. Ft. & No. of Units _____)

NOTE: List all plat restrictions zoning conditions or any other declaration, restriction, condition etc. that might affect this Tentative Plat.
I HEREBY CERTIFY that I am the owner of the parcel(s) described in Item 5 and that the information contained in this application is true and correct to the best of my knowledge and belief. Attached is a copy of the recorded deed showing my acquisition of this land. In addition, I agree to furnish additional items as may be necessary such as abstract or opinion of title to determine accurate ownership information.

Furthermore, I am aware that the use of a public water supply and/or public sewer system may be required for this development. If so required, I recognize that engineering drawings for the extension of these utilities must be approved by the appropriate utility entity and by P.E.R.A. prior to the approval of the final plat.

Pursuant to Florida Statutes 837.06, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her duty shall be guilty of a misdemeanor of the second degree, punishable as provided in FS. 775.082 or FS. 775.083.

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

SS:

Signature of Owner: _____

(Print name & Title here): Masoud Shojae

BEFORE ME, personally appeared Masoud Shojae this 1st day of August, 2012 A.D. and (he/she) acknowledged to and before me that (he/she) executed the same for the purposed therein. Personally known or produce as identification and who did (not) take an oath.

WITNESS my hand and seal in the County and State last aforesaid this 1st day of August, 2012 A.D.



Signature of Notary Public: _____

(Print, Type name here: I Jane Storms)

(NOTARY SEAL)

December 20, 2014 EE033769
(Commission Expires) (Commission Number)

Note: The reverse side of this sheet may be used for a statement of additional items you may wish considered.