



City of Pompano Beach  
 Department of Development Services P&Z#: \_\_\_\_\_  
 Planning & Zoning Division

100 W. Atlantic Blvd Pompano Beach, FL 33060  
 Phone: 954.786.4634 Fax: 954.786.4666

### Zoning Board of Appeals Application

#### Zoning Board of Appeals Application (Check all that apply)

| Zoning Board of Appeals Application (Select one of the following) |          |                               |   |
|---|----------|-------------------------------|---|
| Special Exception   | Variance | Major Temporary Use           | Interim Use Permit  |
| Street Address:<br>3300 SE 1st Street                             |          | Folio Number:<br>9306 06 0740 | Zoning District:<br>MH-12   |
| Subdivision:<br>Blount Bros Pompano Beach Sub                     |          | Block:<br>8                   | Lot:<br>5 to 9 less S5 of said lot less W5 Lot 9,<br>lot 10 to 13 less N5 of said lot & less W5<br>lot 10 |
| Date of Required Pre-Application Conference: 8/27/19              |          |                               |   |

| Project Information   |   |
|---|---|
| Request: Temporary permit for temporary parking lot   |   |
| Representative or Agent's interest in property (Owner, Lessee, Etc):                                |   |
| Have any previous applications been filed? Yes <input type="checkbox"/> No <input type="checkbox"/> | If Yes, give date of hearing and/or appeal #: |

| Owner's Representative or Agent                                 | Landowner (Owner of Record)   |
|---|---|
| Business Name (if applicable):<br>City of Pompano Beach         | Business Name (if applicable):<br>Pure Residence Resort <input checked="" type="checkbox"/> Pompano Beach LLC |
| Print Name and Title:<br>Suzette Sibble, Assistant City Manager | Print Name and Title:   |
| Signature:  | Signature:  |
| Date:<br>8-1-19   | Date:   |
| Street Address:<br>100 West Atlantic Blvd                       | Street Address:<br>100 SE 3rd Avenue #1514  |
| Mailing Address City/ State/ Zip:<br>Pompano Beach, Fl. 33060   | Mailing Address City/ State/ Zip:<br>Fort Lauderdale, Fl #1514  |
| Phone Number:<br>954.786-4609                                   | Phone Number:   |
| Email:<br>suzette.sibble@copbfl.com                             | Email:  |



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**OWNER'S CERTIFICATE**

This is to certify that I am the owner of the subject lands described in this application and that I have authorized the filing of the aforesaid application. I further certify that this request is not related to any existing violation of the zoning code.

Note: If this request is related to an existing zoning violation, please submit documentation as to the Special Master's disposition of the matter.

Owner's Name: Pura Residence Resort Pompano Beach LLC  
(Print or Type)  
Address: 100 SE 3rd Avenue #1514  
Fort Lauderdale, Fl. 33394  
(Zip Code)

Phone: 954-857-5667

Email address: andrea@puraresidence.com  
*Andrea Pulido*  
(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 15 day of AUGUST, 2019.

*Heidi R Collins*  
NOTARY PUBLIC, STATE OF FLORIDA

(Name of Notary Public: Print, stamp, or Type as Commissioned.)

Personally know to me, or  
 Produced identification: \_\_\_\_\_  
(Type of Identification Produced)

