

Project Type: _easement_

P&Z#: _____25-27000001

100 W. Atlantic Blvd Pompano Beach, FL 33060 Phone: 954.786.4679 Fax: 954.786.4666 Request to abandon an

Development Application

Submission #: _____

Site Data				
Project Name:	Easement Abandonment at 1 N Andrews Ave Size of property:			
Street Address:	1 N Andrews Ave	Number of units (Residential):		
Folio Number(s):	484234460010	Total square feet of the building* (Non-Residential):		
Project Narrative:	Request abandonment to the existing cross access easement.			

Applica	nt		Landowner (Owner of Record)	
Name:		Business Name (if applicable):		
Aaron Kosh			SATFAM 1NA LLC	
Title:			Print Name:	
Project Manager			SATFAM 1NA LLC	
Street Address:			Street Address:	
1 SE 3rd Ave Suite 2700			3710 Buckeye ST Suite 100	
Mailing Address City/ State/ Zip:			Mailing Address City/ State/ Zip:	
MIAMI FI	- 331:	31	Palm Beach FL 33410 Gardens	
Phone Number:			Phone Number:	
786-914-2899		914-961-7308		
Email:			Email:	
akosh@bohlereng.com				
ePlan agent (if different):				
Name of ePlan agent:				
Email of ePlan agent:				
Phone Number of ePlan agent:				