



City of Pompano Beach
 Department of Development Services
 Planning & Zoning Division

P&Z#: 22-11000005

100 W. Atlantic Blvd Pompano Beach, FL 33060
 Phone: 954.786.4679 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)			
<input type="checkbox"/> Special Exception	<input checked="" type="checkbox"/> Variance	<input type="checkbox"/> Major Temporary Use	<input type="checkbox"/> Interim Use Permit
Street Address: 117 S RIVERSIDE DRIVE POMPANO BEACH, FL 33062		Folio Number: 4943061105 00	Zoning District: RM-45
Subdivision: POMPANO BAECH PARK PB 21 P 20 BCR		Block: 5	Lot: 6 & 7
Date of Required Pre-Application Meeting:			

Project Information	
Request: LANDSCAPE RELIEF	
Representative or Agent's interest in property (Owner, Lessee, Etc): LEONARD A KARAM, MANAGER	
Have any previous applications been filed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If Yes, give date of hearing and/or appeal #: PZ21-12000029

Owner's Representative or Agent	Landowner (Owner of Record)
Business Name (if applicable):	Business Name (if applicable): ROYAL QUALITY HOMES OF FLA LLC
Print Name and Title:	Print Name and Title: TOLGA ADAK, MANAGER
Signature:	Signature:
Date:	Date: 2-15-22
Street Address:	Street Address: 3625 PARK CENTRAL BLVD
Mailing Address City/ State/ Zip:	Mailing Address City/ State/ Zip: POMPANO BEACH, FL 33064
Phone Number:	Phone Number: 954-444-7899
Email:	Email: TOLGAADAK@AOL.COM



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Zoning Board of Appeals Application

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.

By signing below, I acknowledge that development applications must have a determination by the governing municipality of approved, approved with conditions, or denied within 120 days from a complete submittal for projects that do not require final action through a quasi-judicial hearing or a public meeting and within 180 days from a complete submittal for projects that do require final action through a quasi-judicial hearing or a public meeting per FL Stat § 166.033 and the Pompano Beach Code Section 155.2303.F.3. It is the responsibility of the applicant to receive all final Development Orders and receive this determination within the allotted timeframe. If the applicant fails to resubmit an application within 30 calendar days after being first notified of deficiencies of the submittal, the application shall be considered withdrawn and a \$100 non-refundable administrative fee will apply (155.2303.F.2.b). Additionally, if all required approvals are not received within the allotted timeframe the application will automatically be denied unless both the City and the applicant agree to an extension of time (155.2303.I).

Owner's Name: TOLGA ADAK
(Print or Type)
Address: 3625 PARK CENTRAL BLVD
POMPANO BEACH, FL 33064
(Phone)
954-444-7899
Email address: TOLGAADAK@AOL.COM

(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 15 day of FEBRUARY, 2022 by means of
physical presence or online notarization.

(Handwritten signature of Laetitia Marro)

NOTARY PUBLIC, STATE OF FLORIDA
LAETITIA MARRO



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

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



City of Pompano Beach
 Department of Development Services **P&Z#:** _____
 Planning & Zoning Division

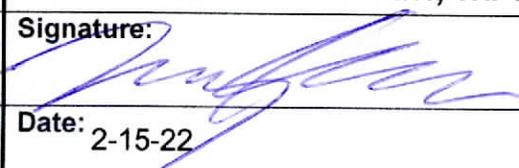
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Have any previous applications been filed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If Yes, give date of hearing and/or appeal #: PZ21-12000029

Owner's Representative or Agent	Landowner (Owner of Record)
Business Name (if applicable):	Business Name (if applicable): 113 S RIVERSIDE LLC
Print Name and Title:	Print Name and Title: LEONARD A KARAM, MANAGER
Signature:	Signature: 
Date:	Date: 2-15-22
Street Address:	Street Address: 660 S FEDERAL HWY SUITE 103
Mailing Address City/ State/ Zip:	Mailing Address City/ State/ Zip: POMPANO BEACH, FL 33062
Phone Number:	Phone Number: 954-547-3062
Email:	Email: LEN@KARAMBROTHERS.COM



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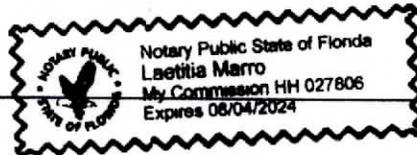
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Owner's Name: LEONARD A KARAM
(Print or Type)
Address: 660 S FEDERAL HWY SUITE 103
POMPANO BEACH, FL 33062
(Phone) 954-547-3062
Email address: LEN@KARAMBROTHERS.COM

(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 15 day of FEBRUARY, 2022 by means of
physical presence or online notarization.

Notary signature and name: LAETITIA MARRO



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

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