



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:<br>3505 Sahara Springs                            |  | Folio Number:<br>494 205100020               | Zoning District:<br>RPUD-6                  |
| Subdivision:<br>Palm Ave Oaks Course Estate                       |  | Block:                                       | Lot:  |
| Date of Required Pre-Application Meeting:                         |  |  |   |

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

| Owner's Representative or Agent                              | Landowner (Owner of Record)       |
|--|-----------------------------------|
| Business Name (if applicable):                               | Business Name (if applicable):    |
| Print Name and Title:<br>KULTHIDA JAVANADI                   | Print Name and Title:             |
| Signature:<br><i>Kulthida Javanadi</i>                       | Signature:                        |
| Date:<br>12/15/2021  | Date:                             |
| Street Address:<br>3505 SAHARA SPRINGS BLVD                  | Street Address:                   |
| Mailing Address City/ State/ Zip:<br>POMPANO BEACH, FL 33069 | Mailing Address City/ State/ Zip: |
| Phone Number:<br>954 778 0816                                | Phone Number:                     |
| Email:<br>KUL33069@GMAIL.COM                                 | Email:                            |



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

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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: KULTHIDA JAVANADI

(Print or Type)

Address: 3505 SAHARA SPRINGS BLVD

POMPANO BEACH, FL 33069

(Zip Code)

Phone: 954 778 0816

Email address: KUL33069@GMAIL.COM

Kulthida Javanadi

(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 14<sup>th</sup> day of Dec 2021 by means of  physical presence or  online notarization.

[Signature]  
NOTARY PUBLIC, STATE OF FLORIDA



LIZA A. GARCIA  
Commission # GG 303844  
Expires April 3, 2023  
Bonded Thru Budget Notary Services

LIZA A. GARCIA

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

Personally know to me, or  
 Produced identification:

\_\_\_\_\_  
(Type of Identification Produced)