



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

P&Z#: 17-140000 07

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

**Plat Application**

**Plat Review**

Plat Application		
<b>Street Address:</b> 1501 HAMMONDVILLE ROAD	<b>Folio Number:</b> 4842-28-00-0350 36 38	<b>Zoning District:</b>
<b>Subdivision:</b> SECTION 28, TOWNSHIP 40 S, RANGE 42 E	<b>Block:</b> N/A	<b>Lot:</b> N/A
<b>Applicant's interest in property (Owner, Lessee, Etc):</b> CONSULTANT		
<b>Have any previous applications been filed?</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>If Yes, give date of hearing and finding:</b>	
<b>Project Name:</b> TOP SELF STORAGE	<b>Acreage:</b> 7.24 ACRES	

Applicant	Landowner (Owner of Record)
<b>Business Name (if applicable):</b> PAUL E. BREWER AND ASSOCIATES, INC.	<b>Business Name (if applicable):</b> TOP SELF STORAGE THREE, LLC
<b>Print Name and Title:</b> PAUL E. BREWER, PRESIDENT	<b>Print Name and Title:</b> ARVID ALBANESE - MANAGING MEMBER
<b>Signature:</b> 	<b>Signature:</b> 
<b>Date:</b> APRIL 17, 2017	<b>Date:</b> April 24, 2017
<b>Street Address:</b> 12321 NORTHWEST 35th STREET	<b>Street Address:</b> 3511 NE. 22nd Avenue
<b>Mailing Address City/ State/ Zip:</b> CORAL SPRINGS, FLORIDA 33065	<b>Mailing Address City/ State/ Zip:</b> Fort Lauderdale - Florida - 33308
<b>Phone Number:</b> (954) 753-5210	<b>Phone Number:</b> (954) 644 - 3006
<b>Email:</b> brewerin@bellsouth.net	<b>Email:</b> arvid@albanesegroup.com
<b>Email of ePlan agent (if different):</b>	





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155.2303. APPLICATION SUBMITTAL AND ACCEPTANCE

A. AUTHORITY TO SUBMIT APPLICATIONS

- 1. Unless expressly stated otherwise in this Code, applications for a development permit reviewed under this Code shall be submitted by:
a. The owner, contract purchaser, or any other person having a recognized property interest in the land on which development is proposed; or
b. A person authorized to submit the application on behalf of the owner, contract purchaser, or other person having a recognized property interest in the land, as evidenced by a letter or document signed by such owner, contract purchaser, or other person.
2. If there are multiple owners, contract purchasers, or other persons authorized to submit the application, all such persons shall sign the application or a letter or document consenting to the application.

OWNERS CERTIFICATE

This is to certify that I am the owner of the subject lands described in this PLAT APPLICATION and that I have authorized the filing of the aforesaid application.

Owner's Name: TOP SELF STORAGE THREE, LLC - ARVID ALBANESE (Man.Member)
(Print or Type)

Address: 3511 NE 22nd Avenue - Suite 350
FORT LAUDERDALE - FL - 33308
(Zip Code)

Phone: (954) 644-3006

Email address: arvid@albanesegroup.com

(Signature of Owner or Authorized Official)



SWORN AND SUBSCRIBED before me this 24th day of April, 2017.

NOTARY PUBLIC, STATE OF FLORIDA

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



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

