



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

P&Z#: 20-12000019

BD#: _____

Development Application

100 W. Atlantic Blvd Pompano Beach, FL 33060
Phone: 954.786.4679 Fax: 954.786.4666

Development Review (Check all that apply)

Site Plan		Building Design	
<input type="checkbox"/> Minor	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor	<input checked="" type="checkbox"/> Major
Street Address: 3300 NW 31 AVE Pompano Beach		Folio Number: 484221130010	Zoning District: I-1
Subdivision: ALPHA 250 North		Block: 180-14 B Parcel F	Lot:
Date of Pre-Application Conference (Required for Major Site Plan):			

Site Data		
Project Name: Amazon Delivery Station		
Acres*: 35.2	Number of units (Residential):	Total square feet of the building* Bldg. B (Non-Residential): Bldg. D 170,615 119,898

*Minimum of one acre. Acres should be rounded to the nearest tenth. Square feet for non-residential developments should be rounded to the nearest thousand.

Owner's Representative or Agent	Landowner (Owner of Record)
Business Name (if applicable): CPH, Inc.	Business Name (if applicable): IDI Logistics, LLC
Print Name and Title: Jason L. James, P.E.	Print Name and Title: Nick Faber- Market Officer
Signature: [Signature]	Signature: [Signature]
Date: 7/14/20	Date: July 6, 2020
Street Address: 1992 SW 1st Street	Street Address: 1100 Peachtree St. NE, Suite #1000
Mailing Address City/ State/ Zip: Miami, FL 33135	Mailing Address City/ State/ Zip: Atlanta, GA 30309
Phone Number: (305) 274-4805	Phone Number: 404.479.1642
Email: jjames@cphcorp.com	Email: nick.faber@idilogistics.com
Email of ePlan agent (if different): bpporter@cphcorp.com	



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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.

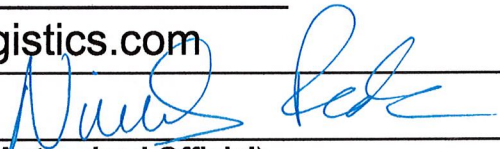
By signing below, I agree that if the proposed development is found not in compliance with the applicable standards and minimum requirements of this Code then no building permit will be issued until those conditions the Development Services Director finds reasonably necessary to insure compliance are met.

Owner's Name: IDI Logistics, LLC
(Print or Type)


Address: 1100 Peachtree St. NE, Suite #1000
Atlanta, GA 30309
(Zip Code)

Phone: 404.479.1642

Email address: nick.faber@idilogistics.com


(Signature of Owner or Authorized Official)

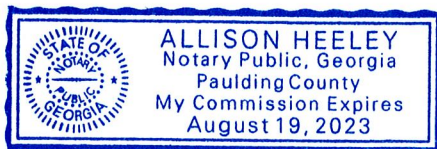
SWORN AND SUBSCRIBED before me this 6th day of July, 2020.


NOTARY PUBLIC, STATE OF FLORIDA Georgia

Allison Heeley

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

- ☒ Personally know to me, or
☐ Produced identification: _____
(Type of Identification Produced)



DRC

PZ20-12000019
10/21/2020

DRC

PZ20-12000019
8/19/2020



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Acknowledgement receipt of the Florida NPDES Stormwater Permitting Program for Construction Activity

I Joshua Bryant am the Project Manager/V.P. of CPH, Inc. of the proposed application for
(Print Name) (Title)

Development approval and authorized to sign on behalf of the owner. I hereby acknowledged that I have been given a copy of the Florida National Pollutant Discharge Elimination System (NPDES) Permitting Program for construction activity.

Signature:

Date:

7/15/20

DRC

DRC