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

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

Special Exception Application

STREET ADDRESS		**Zoning District**
2781 NE 2 AVE POMPANO BEACH FL 33069		RS-3
Subdivision Second Addition Pompano Estates	**Block** 8	**Lot** 6
Representative or Agent's interest in property (Owner, Lessee, Etc)	LESSEE	
Has any previous application(s) been filed?	Yes ____ No X	
If Yes, give date of hearing and finding		

Owner's Representative or Agent	**Landowner (Owner of Record)**
Abrams Law Firm, P.A. c/o Ryan Abrams - Agent	
Business Name (if applicable)	**Business Name (if applicable)**
Second Chance Recovery Housing	**Shmulik Rentals LLC**
Print Name and Title	**Print Name and Title**
Signature	**Signature**
4/27/2021	4/27/2021
Date	**Date**
3910 NW 43rd Street Coconut Creek , FL 33073	1850 NW 15TH Ave., # 200 Pompano Beach, FL 33069
Street Address	**Street Address**
888 SE 3rd Ave., Suite 400, Fort Lauderdale, FL 33316	1850 NW 15TH Ave., # 200 Pompano Beach, FL 33069
Mailing Address City/ State/ Zip	Mailing Address City/ State/ Zip
(954)332-2358	(954)348-0719
Phone Number	**Phone Number**
rabrams@abrams-law.com	Sam.meersohn@gmail.com
Email	**Email**
Indicate your preferred medium to receive agendas and notifications: ___ Mail X E-Mail	Indicate your preferred medium to receive agendas and notifications: ___ Mail X E-Mail

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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. 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.

Owner's Name: Shmuel Meersohn
(Print or Type)
Address: 11564 Kensington Ct
Boca Raton FL 33064
(Zip Code)

Phone: 954-348-0718

Email address: Sam.Meersohn@gmail.com

S. Meersohn
(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 26 day of April, 2021.

John Tironi
NOTARY PUBLIC, STATE OF FLORIDA

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

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

Notary Public State of Florida
John James Tironi
My Commission GG 235186
Expires 07/04/2022