



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

P&Z#: 20-12000027

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

Development Application

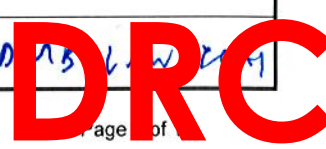
Development Review (Check all that apply)

Site Plan		Building Design	
<input type="checkbox"/> Minor	<input checked="" type="checkbox"/> Major	<input checked="" type="checkbox"/> Applicable (AAC Required)	<input type="checkbox"/> Not Applicable
Street Address: 400 East Atlantic Boulevard SE 4 Terrace		Folio Number: 494201010010 494201000311	Zoning District: TO/EOD
Subdivision: Cassel's Addition to Town of Pompano Florida (PB1 P118)		Block:	Lot: Lots 1 & 2
Date of Pre-Application Meeting (Required for Major Site Plan): June 30, 2020			

Site Data		
Project Name: 400 E Atlantic		
Acres*: 1.6	Number of units (Residential): 234	Total square feet of the building* (Non-Residential): 3,000

*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): Dunay, Miskel, and Backman, LLP	Business Name (if applicable): Atlantic Estates, LLC
Print Name and Title: Matthew Scott, Esq./Beth Schrantz, Director of Planning Services	Print Name and Title: Luis Dominguez, Manager
Signature:	Signature:
Date: 12/1/2020	Date:
Street Address: 14 SE 4th Street, Suite 36	Street Address: 1 East Broward Boulevard, Suite 1800
Mailing Address City/ State/ Zip: Boca Raton, FL 33432	Mailing Address City/ State/ Zip: Ft. Lauderdale, FL 33301
Phone Number: (561) 405-3350 / (786) 763-0565	Phone Number: Please contact Agent
Email: mscott@dmbblaw.com/ bschrantz@dmbblaw.com	Email: Please contact Agent
Email of ePlan agent (if different): bschrantz@dmbblaw.com / mscott@dmbblaw.com	





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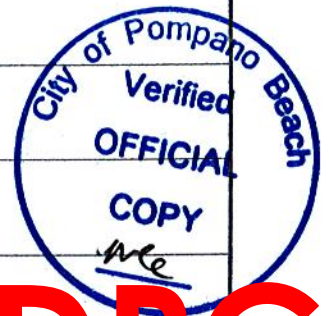
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Print Name and Title: Matthew Scott, Esq./Beth Schrantz, Director of Planning Services	Print Name and Title: Luis Dominguez, Manager
Signature:	Signature:
Date:	Date: 12.1.2020
Street Address: 14 SE 4th Street, Suite 36	Street Address: 1 East Broward Boulevard, Suite 1800
Mailing Address City/ State/ Zip: Boca Raton, FL 33432	Mailing Address City/ State/ Zip: Ft. Lauderdale, FL 33301
Phone Number: (561) 405-3350 / (786) 763-0565	Phone Number: Please contact Agent
Email: mscott@dmblaw.com/ bschrantz@dmblaw.com	Email: Please contact Agent
Email of ePlan agent (if different): bschrantz@dmblaw.com	



DRC

PZ20-12000027
1/6/2021



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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 ensure compliance are met.

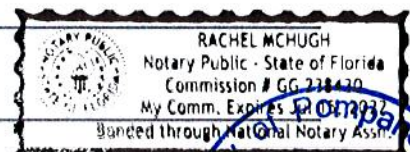
By signing below, I acknowledge that development applications must have a determination by the governing municipality of approved, approved with conditions, or denied within 120 days from a complete submittal for projects that do not require final action through a quasi-judicial hearing or a public meeting 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: Atlantic Estates, LLC
(Print or Type)
Address: 1 East Broward Boulevard, Suite 1800
Ft. Lauderdale, FL 33301
(Zip Code)
Phone: Please contact Agent
Email address: Please contact Agent
[Signature]
(Signature of Owner or Authorized Official)

SWORN AND SUBSCRIBED before me this 1st day of December, 2020 by means of
☒ physical presence or ☐ online notarization.

[Signature]
NOTARY PUBLIC, STATE OF FLORIDA

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



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



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

I Luis Dominguez am the Manager 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:

Luis Dominguez

Date:

12-1-2020

