City of Pembroke Pines
Planning and Economic Development Division
Unified Development Application

Planning and Economic Development
Building -B, Third Floor
10100 Pines Boulevard
Pembroke Pines, FL 33026
Phone: (954) 435-6513
Fax: (954) 435-6546
http://www.ppines.com

Prior to the submission of this application, the applicant must have a pre-application meeting with Planning Division staff to review the proposed project submittal and processing requirements.

Pre Application Meeting Date: _____

 # Plans for DRC _____ *Planner*: _____

Indicate the type of application you are applying for:

- ❑ Appeal*
- ❑ Comprehensive Plan Amendment
- ❑ Delegation Request
- ❑ DRI*
- ❑ DRI Amendment (NOPC)*
- ❑ Flexibility Allocation
- ❑ Interpretation*
- ❑ Land Use Plan Map Amendment*
- ❑ Miscellaneous
- ❑ Plat*
- ❑ Sign Plan
- ❑ Site Plan*
- ❑ Site Plan Amendment*
- ❑ Special Exception*
- ❑ Variance (Homeowner Residential)
- ❑ Variance (Multifamily, Non-residential)*
- ❑ Zoning Change (Map or PUD)*
- ❑ Zoning Change (Text)
- ❑ Zoning Exception*
- ❑ Deed Restriction

INSTRUCTIONS:

1. All questions must be completed on this application. If not applicable, mark ***N/A***.
2. Include all submittal requirements / attachments with this application.
3. All applicable fees are due when the application is submitted (Fees adjusted annually).
4. Include mailing labels of all property owners within a 500 feet radius of affected site with signed affidavit (Applications types marked with *).
5. All plans must be submitted no later than noon on Thursday to be considered for Development Review Committee (DRC) review the following week.
6. Adjacent Homeowners Associations need to be noticed after issuance of a project number and a minimum of 30 days before hearing. (Applications types marked with *).
7. The applicant is responsible for addressing staff review comments in a timely manner. Any application which remains inactive for over 6 months will be removed from staff review. A new, updated, application will be required with applicable fees.
8. Applicants presenting demonstration boards or architectural renderings to the City Commission must have an electronic copy (PDF) of each board submitted to Planning Division no later than the Monday preceding the meeting.

Staff Use Only

Project Planner: _____ **Project Number:** _____

Date Submitted: _____ **# Posted Signs Required:** _____ **Fees: $**_____

SECTION 1-PROJECT INFORMATION:

Project Name: _____

Project Address: _____

Location / Shopping Center: _____

Acreage of Property: _____ Building Square Feet: _____

Flexibility Zone: _____ Folio Number(s): _____

Plat Name: _____Traffic Analysis Zone (TAZ): _____

Legal Description:

_____

_____

_____

Has this project been previously submitted? Yes No

Describe previous applications on property (Approved Variances, Deed Restrictions, etc…) Include previous application numbers and any conditions of approval.

Date	Application	Request	Action	Resolution / Ordinance #	Conditions of Approval

SECTION 2 - APPLICANT / OWNER / AGENT INFORMATION

Owner's Name: _____

Owner's Address: _____

Owner's Email Address: _____

Owner's Phone: _____ Owner's Fax: _____

Agent: _____

Contact Person: _____

Agent's Address: _____

Agent's Email Address: _____

Agent's Phone: _____ Agent's Fax: _____

All staff comments will be sent directly to agent unless otherwise instructed in writing from the owner.

SECTION 3- LAND USE AND ZONING INFORMATION:

EXISTING	PROPOSED
Zoning: _____	Zoning: _____
Land Use / Density: _____	Land Use / Density: _____
Use: _____	Use: _____
Plat Name: _____	Plat Name: _____
Plat Restrictive Note: _____	Plat Restrictive Note: _____
_____	_____

ADJACENT ZONING	ADJACENT LAND USE PLAN
North: _____	North: _____
South: _____	South: _____
East: _____	East: _____
West:_____	West: _____

-This page is for Variance, Zoning Appeal, Interpretation and Land Use applications only-

SECTION 4 – VARIANCE • ZONING APPEAL • INTERPRETATION ONLY

Application Type (Circle One): Variance Zoning Appeal Interpretation

Related Applications: _____

Code Section: _____

Required: _____

Request: _____

Details of Variance, Zoning Appeal, Interpretation Request:

_____

_____

_____

_____

_____

_____

_____

_____

_____

SECTION 5 - LAND USE PLAN AMENDMENT APPLICATION ONLY

❑ City Amendment Only ❑ City and County Amendment

Existing City Land Use: _____

Requested City Land Use: _____

Existing County Land Use: _____

Requested County Land Use: _____

SECTION 6 - DESCRIPTION OF PROJECT (attach additional pages if necessary)

SECTION 7- PROJECT AUTHORIZATION

OWNER CERTIFICATION

This is to certify that I am the owner of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge.

_____

Signature of Owner Date

Sworn and Subscribed before me this _____ day

of _____, 20_____

_____

Fee Paid Signature of Notary Public My Commission Expires

AGENT CERTIFICATION

This is to certify that I am the agent of the property owner described in this application and that all information supplied herein is true and correct to the best of my knowledge.

_____

Signature of Agent Date

Sworn and Subscribed before me this _____ day

of _____, 20_____

_____

Fee Paid Signature of Notary Public My Commission Expires