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Sec. Twp. Range

**ZONING HEARING APPLICATION  
MIAMI-DADE COUNTY  
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES**



LIST ALL FOLIO #s: 30-4017-013-0050

Date Received

**1. NAME OF APPLICANT** (Owner(s) of record of the property or lessee. If applicant is a lessee, an executed 'Owner's Sworn-to-Consent' and copy of a valid lease for 1 year or more is required. If the applicant is a corporation, trust, partnership, or like entity, a 'Disclosure of Interest' is required).

Alion Properties LLC

**2. APPLICANT'S MAILING ADDRESS, TELEPHONE NUMBER:**

Mailing Address: 16110 W. Prestwick Place

City: Miami Lakes State: FL Zip: 33014 Phone#: (305) 525-2510

**3. OWNER'S NAME, MAILING ADDRESS, TELEPHONE NUMBER:**

Owner's Name (Provide name of ALL owners): Alion Properties LLC

Mailing Address: 16110 W. Prestwick Place

City: Miami Lakes State: FL Zip: 33014 Phone#: (305) 525-2510

**4. CONTACT PERSON'S INFORMATION:**

Name: Javier L. Vazquez Company: Berger Singerman, LLP

Mailing Address: 1450 Brickell Avenue, Suite 1900

City: Miami State: FL Zip: 33131

Phone# (305) 714-4378 Fax# (305) 714-4340 E-mail: jvazquez@bergersingerman.com

**5. LEGAL DESCRIPTION OF ALL PROPERTY COVERED BY THE APPLICATION**

(Provide complete legal description, i.e., lot, block, subdivision name, plat book & page number, or metes and bounds. Include section, township, and range. If the application contains multiple rezoning requests, a legal description for each requested zone must be provided. Attach separate sheets as needed and clearly label (identify) each legal description attached. In addition to paper version it is requested that lengthy metes and bounds descriptions be provided on diskette or compact disc in Microsoft Word or compatible software.)

See attached Exhibit "A"

**6. ADDRESS OR LOCATION OF PROPERTY** (For location, use description such as NE corner of, etc.)

9898 SW 32 Street

15-035

7. SIZE OF PROPERTY 105 ft x 241 ft (in acres): \_\_\_\_\_  
(divide total sq. ft. by 43,560 to obtain acreage)

8. DATE property  acquired  leased: February 2015 (month & year)

9. Lease term: \_\_\_\_\_ years

10. IS CONTIGUOUS PROPERTY OWNED BY THE SUBJECT PROPERTY OWNER(S)?

no  yes  If yes, provide complete legal description of said contiguous property.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Is there an option to purchase  or lease  the subject property or property contiguous thereto?

no  yes  (If yes, identify potential purchaser or lessee and complete 'Disclosure of Interest' form)

\_\_\_\_\_

12. PRESENT ZONING CLASSIFICATION: RU-1 and Agriculture

13. APPLICATION REQUESTS (Check all that apply and describe nature of the request in space provided)

District Boundary(zone) Changes [Zone(s) requested]: RU-1

(Provide a separate legal description for each zone requested)

Unusual Use: \_\_\_\_\_

Use Variance: \_\_\_\_\_

Non-Use Variance: \_\_\_\_\_

Alternative Site Development: Option: \_\_\_\_\_

Special Exception: \_\_\_\_\_

Modification of Previous Resolution/Plan: \_\_\_\_\_

Modification of Declaration or Covenant: \_\_\_\_\_



14. Has a public hearing been held on this property within the last year & a half? no  yes .

If yes, provide applicant's name, date, purpose and result of hearing, and resolution number:

15. Is this application a result of a violation notice? no  yes . If yes, give name to whom the

violation notice was served: \_\_\_\_\_ and describe the violation:

\_\_\_\_\_

16. Describe structures on the property: Single family home

17. Is there any existing use on the property? no  yes . If yes, what use and when established?

Use: Single family home Year: 1951

18. Do you require a translator for the actual hearing? Yes  No

If yes: Spanish  Haitian Creole  Other  (Please specify which language)

\_\_\_\_\_

19. If you would like a preliminary courtesy review of your application by the technical staff of the Developmental Impact Committee, please check Yes

If yes, the application will be placed on the next available Developmental Impact Committee agenda. There is no additional charge for this service.

**APPLICANT'S AFFIDAVIT**

The Undersigned, first being duly sworn depose that all answers to the questions in this application, and all supplementary documents made a part of the application are honest and true to the best of (my)(our) knowledge and belief. (I)(We) understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

OWNER OR TENANT AFFIDAVIT

(I)(WE), \_\_\_\_\_, being first duly sworn, depose and say that (I am)(we are) the  owner  tenant of the property described and which is the subject matter of the proposed hearing.

*[Handwritten Signature]*  
Signature



*[Handwritten Signature]*  
Signature

Sworn to and subscribed to before me this 20 day of APRIL, 2015

Notary Public: \_\_\_\_\_  
Commission Expires: APRIL 26, 2015

CORPORATION AFFIDAVIT

(I)(WE), \_\_\_\_\_, being first duly sworn, depose and say that (I am)(we are) the  President  Vice-President  Secretary  Asst. Secretary of the aforesaid corporation, and as such, have been authorized by the corporation to file this application for public hearing; and that said corporation is the  owner  tenant of the property described herein and which is the subject matter of the proposed hearing.

Attest: \_\_\_\_\_

(Corp. Seal)



Sworn to and subscribed to before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

PARTNERSHIP AFFIDAVIT

(I)(WE), \_\_\_\_\_, being first duly sworn, depose and say that (I am)(we are) partners of the hereinafter named partnership, and as such, have been authorized to file this application for a public hearing; and that said partnership is the  owner  tenant of the property described herein which is the subject matter of the proposed hearing.

(Name of Partnership)

By \_\_\_\_\_ %  
By \_\_\_\_\_ %

By \_\_\_\_\_ %  
By \_\_\_\_\_ %

Sworn to and subscribed to before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

ATTORNEY AFFIDAVIT

I, \_\_\_\_\_, being first duly sworn, depose and say that I am a State of Florida Attorney at Law, and I am the Attorney for the Owner of the property described and which is the subject matter of the proposed hearing.

Signature

Sworn to and subscribed to before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

**ACKNOWLEDGEMENT BY APPLICANT**

1. The Public Works Department, the Department of Environmental Resources Management (DERM), and other County agencies review and critique zoning hearing applications which may affect the scheduling and outcome of my hearing. These reviews may require additional hearings before DERM's Environmental Quality Control Board (EQCB), or other County boards, and/or the proffering of agreements to be recorded. I am also aware that I must comply promptly with any DERM or Public Works conditions and advise this office in writing if my application will be withdrawn.
2. Filing fees may not be the total cost of a hearing. Some requests require notices to be mailed to property owners up to a mile from the subject property and I am responsible for paying the additional radius mailing costs. In addition to mailing costs, I am responsible for additional fees related to application changes, plan revisions, deferrals, re-advertising, etc., that may be incurred. I understand that fees must be paid promptly. Applications withdrawn within 60 days of the filing are eligible for a refund of 50% of the hearing fee but after that time hearings withdrawn or returned will be ineligible for a refund. Refunds must be requested in writing.
3. Applicable Florida Building Code requirements may affect my ability to obtain a building permit even if my zoning application is approved; and a building permit will probably be required. I am responsible for obtaining any required permits and inspections for all structures and additions proposed, or built without permits. And that a Certificate of Use (C.U.) must be obtained for the use of the property after it has been approved at Zoning Hearing. Failure to obtain the required permits and/or C.U., Certificates of Completion (C.C.) or Certificate of Occupancy (C.O.) will result in enforcement action against any occupant and owner. Submittal of the Zoning Hearing application may not forestall enforcement action against the property.
4. The 3<sup>rd</sup> District Court of Appeal has ruled that zoning applications inconsistent with the Comprehensive Development Master Plan (CDMP) should not be approved by a zoning board and the recommendation will be for denial or deferral. Therefore, I acknowledge that if the hearing request is inconsistent with the CDMP and I decide to go forward then my hearing request can only be denied or deferred, but not approved. I also understand that I will not be reimbursed any fees paid unless I withdraw within 60 days of filing and then I will receive a 50% refund.
5. Any covenant to be proffered must be submitted to the Department's Legal Advisor, on County form, at least 1 month prior to the hearing date. The covenant will be reviewed and the applicant will be notified if changes or corrections are necessary. Once the covenant is acceptable, the applicant is responsible to submit the executed covenant with a current 'Opinion of Title' within 1 week of the hearing. Legal Advisor can advise as to additional requirements applicable to foreign corporations. Documents submitted to Legal Advisor must carry a cover letter indicating subject matter, application number and hearing date. Legal Advisor may be reached at (305) 375-3075

*[Handwritten Signature]*

(Applicant's Signature)

Javier Vazquez

(Print Name of Applicant)

Alion Properties LLC

Sworn to and subscribed before me on the

20 Day of APRIL, 2015.

Affiant is personally known to me or has produced \_\_\_\_\_ as identification.

*[Handwritten Signature]*

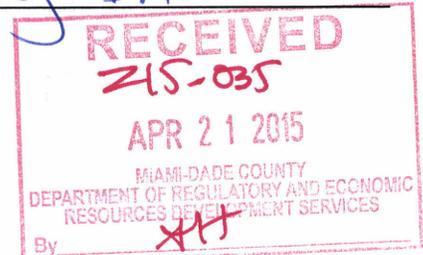
(Notary Public's Signature)

MILAUDY DAVILA

Print Name

My commission expires APRIL 26, 2015

State of: FLORIDA



OWNERSHIP AFFIDAVIT  
FOR  
CORPORATION

STATE OF Florida Public Hearing No. \_\_\_\_\_  
COUNTY OF Miami-Dade

Before me, the undersigned authority, personally appeared Javier Vazquez  
\_\_\_\_\_ hereinafter the Affiant(s), who being first duly  
sworn by me, on oath, deposes and says:

1. Affiant is the president, vice-president or CEO of the Corporation, with the following address:  
Alion Properties LLC

2. The Corporation owns the property which is the subject of the proposed hearing.

3. The subject property is legally described as:  
See attached Exhibit "A"



4. Affiant is legally authorized to file this application for public hearing.

5. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

**Witnesses:**

[Signature]  
Signature

[Signature]  
Affiant's signature

Lillian Rodriguez  
Print Name

Javier Vazquez  
Print Name

Cleopatra Lataouche  
Signature

Cleopatra Lataouche  
Print Name

Sworn to and subscribed before me on the 20 day of APRIL 20 15.

Affiant is personally known to me or has produced \_\_\_\_\_ as identification

Notary Milaidy Davila

(Stamp/Seal)



Commission Expires: APRIL 26, 2015.

DISCLOSURE OF INTEREST\*

If a CORPORATION owns or leases the subject property, list principal stockholders and percent of stock owned by each. [Note: Where principal officers or stockholders consist of other corporation(s), trust(s), partnership(s) or other similar entities, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

CORPORATION NAME: Alion Properties LLC

<u>NAME AND ADDRESS</u>	<u>Percentage of Stock</u>
Javier Vazquez	100%
16110 W. Prestwick Place	
Miami Lakes, FL 33014	

If a TRUST or ESTATE owns or leases the subject property, list the trust beneficiaries and the percent of interest held by each. [Note: Where beneficiaries are other than natural persons, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

TRUST/ESTATE NAME \_\_\_\_\_

<u>NAME AND ADDRESS</u>	<u>Percentage of Interest</u>

**RECEIVED**  
215-035  
APR 21 2015  
MIAMI-DADE COUNTY  
DEPARTMENT OF REGULATORY AND ECONOMIC  
RESOURCES DEVELOPMENT SERVICES  
By *ATT*

If a PARTNERSHIP owns or leases the subject property, list the principals including general and limited partners. [Note: Where the partner(s) consist of another partnership(s), corporation(s), trust(s) or other similar entities, further disclosure shall be made to identify the natural persons having the ultimate ownership interest].

PARTNERSHIP OR LIMITED PARTNERSHIP NAME: \_\_\_\_\_

<u>NAME AND ADDRESS</u>	<u>Percentage of Ownership</u>

If there is a **CONTRACT FOR PURCHASE**, by a Corporation, Trust or Partnership list purchasers below, including principal officers, stockholders, beneficiaries or partners. [Note: Where principal officers, stockholders, beneficiaries or partners consist of other corporations, trusts, partnerships or other similar entities, further disclosure shall be made to identify natural persons having the ultimate ownership interests].

NAME OF PURCHASER: \_\_\_\_\_

NAME, ADDRESS AND OFFICE (if applicable)

Percentage of Interest

_____	_____
_____	_____
_____	_____
_____	_____

Date of contract: \_\_\_\_\_

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership or trust.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



**NOTICE:** For any changes of ownership or changes in purchase contracts after the date of the application, but prior to the date of final public hearing, a supplemental disclosure of interest is required.

The above is a full disclosure of all parties of interest in this application to the best of my knowledge and belief.

Signature: \_\_\_\_\_  
(Applicant)

Sworn to and subscribed before me this 20 day of APRIL, 2015. Affiant is personally know to me or has produced \_\_\_\_\_ as identification.

Milaidy Davila  
(Notary Public)



My commission expires: APRIL 26, 2015

Seal

\*Disclosure shall not be required of: 1) any entity, the equity interests in which are regularly traded on an established securities market in the United States or another country; or 2) pension funds or pension trusts of more than five thousand (5,000) ownership interests; or 3) any entity where ownership interests are held in a partnership, corporation or trust consisting of more than five thousand (5,000) separate interests, including all interests at every level of ownership and where no one (1) person or entity holds more than a total of five per cent (5%) of the ownership interest in the partnership, corporation or trust. Entities whose ownership interests are held in a partnership, corporation, or trust consisting of more than five thousand (5,000) separate interests, including all interests at every level of ownership, shall only be required to disclose those ownership interest which exceed five (5) percent of the ownership interest in the partnership, corporation or trust.