

Sec. Twp. Range

Pre-Application No.:
Pre-Application Meeting Date:

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

RECEIVED
215-85
AUG 18 2015
MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC
RESOURCES DEVELOPMENT SERVICES
Date Received
By: *[Signature]*

LIST ALL FOLIO #s: 30-4131-004-0050

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).

DR ISMAEL + ALICE ROQUE-VELASCO

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

Mailing Address: 8040 SW 54th Ct.
City: MIAMI State: FL Zip: 33143
Phone# 786-205-9950 Fax# _____ E-mail: DRISHROQUE13@gmail.com

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

Owner's Name (Provide name of ALL owners): DR + MRS ISMAEL + ALICE ROQUE-VELASCO
Mailing Address: 8040 SW 54th Ct.
City: MIAMI State: FL Zip: 33143

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

Name: ISMAEL ROQUE-VELASCO Company: _____
Mailing Address: 8040 SW 54th Ct.
City: MIAMI State: FL Zip: 33143
Phone# 786-205-9950 Fax# _____ E-mail: DRISHROQUE13@gmail.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 CD in Microsoft Word.)

TRACTS OF: "CORTOREL" ACCORDING TO THE
PLAT THEREOFAS RECORDED IN PLAT BOOK 48, PAGE
70 OF THE PUBLIC RECORDS OF MIAMI-DADE
COUNTY, FLORIDA.

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

8040 SW 54th Ct. Miami FL 33143

7. SIZE OF PROPERTY 143.46' ft x 258.64' ft (in acres): 0.85 ACRES
(divide total sq. ft. by 43,560 to obtain acreage)

8. DATE property acquired leased: _____ (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: RESIDENTIAL SINGLE FAMILY

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

District Boundary(zone) Changes [Zone(s) requested]: _____
(Provide a separate legal description for each zone requested)

Unusual Use: _____

Use Variance: _____

Non-Use Variance: Accessory Use in front of house

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: _____
(T045209) (T045208)

17. Is there any existing use on the property? no yes . If yes, what use and when established?
Use: HOME Year: 2003

18. Do you require a translator for the actual hearing? Yes No
If yes: Spanish Haitian Creole Other (Please specify which language)



OWNERSHIP AFFIDAVIT
FOR
INDIVIDUAL(S)

STATE OF FLORIDA Public Hearing No. _____

COUNTY OF MIAMI-DADE

Before me, the undersigned authority, personally appeared ISMAEL ROQUE-VELASCO, hereinafter the Affiant, who being first duly sworn by me, on oath, deposes and says:

- 1. Affiant is the fee owner of the property that is the subject of the proposed hearing.
- 2. The subject property is legally described as:

TRACT 5 OF 1 "CORTOPEL" ACCORDING TO THE
PLAT THEREOF AS RECORDED IN PLAT BOOK 48,
PAGE 70 OF THE PUBLIC RECORDS OF MIAMI-DADE
COUNTY, FLORIDA

- 3. 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:

Agneda Solvarana
Signature

[Signature]
Affiant's Signature

Agneda Solvarana
Print Name

ISMAEL ROQUE-VELASCO
Print Affiant's Name

[Signature]
Signature

[Signature]
Affiant's Signature

CECILIA T. MENENDEZ
Print Name

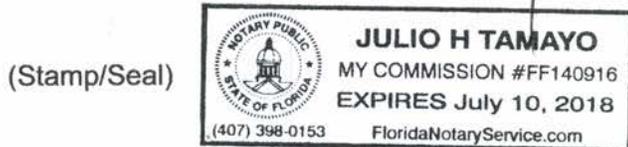
ALICE ROQUE-VELASCO
Print Affiant's Name

Sworn to and subscribed before me on the 17th day of August, 2015
Affiant is personally known to me or has produced _____ as identification.

Notary [Signature]



FOR CONNALL



Commission Expires: 07/10/2018

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), ISMAEL ROQUE-VELAZCO, 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.

Signature [Signature] Signature [Signature]
Sworn to and subscribed to before me this 17 day of August, 2015
Notary Public: [Signature]
Commission Expires: 07/10/2018



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)



Authorized Signature _____
Office Held _____

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 aforesaid 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.

By _____ % (Name of Partnership) _____ %
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 _____

PLEASE BE AWARE THAT THIS IS A LEGALLY BINDING DOCUMENT AND ALL REQUESTED ADJUSTMENTS MUST BE STATED CLEARLY PRIOR TO ACQUISITION OF SIGNATURES. THERE WILL BE NO EXCEPTIONS.

CONSENT FORM

I, ISMAEL ROQUE-VELASCO have applied for an Administrative Adjustment to Director of the Miami-Dade County Department of Regulatory and Economic Resources, to permit setback adjustment for detached structure/fence 3' and 9' chain link fence around playground. Fence has a setback of 48' (as required) from the front (width of property line), and 10' from the north (20' required)

We, the undersigned property owners, have read (or have had read to us) the information applicable to this request for an Administrative Adjustment from the Zoning Code as applied to the unincorporated area of Miami-Dade County and fully understand that by subscribing my name to this consent form, I am waiving any objection to the proposed construction as outlined above and as shown on the plans accompanying this application. I further certify that I have subscribed my name freely and without any duress or apparent misrepresentation on the part of the applicant to this form and to the plans accompanying this application.

0 ① JORGE FERNANDEZ-SILVA 8041 SW 54 Ct Miami, FL Date 4/27/14
Name (Type or Print) Address

[Signature]
Signature

✓ ② Monsieur Jude P. Porecky 8080 S.W. 54 Court Miami, FL Date 6/2/14
Name (Type or Print) Address

[Signature]
Signature

③ VACANT STREET CUL-DE-SAC _____ Date _____
Name (Type or Print) Address

④ Michael Agha 5521 SW 81 Terrace, FL Date 6-8-14
Name (Type or Print) Address

[Signature]
Signature

✓ ⑤ Fernando Vria 5500 SW 80th Ave Date 6/2/14
Name (Type or Print) Address

[Signature]
Signature

✓ ⑥ PATRICK HUGHES 5480 SW 80th St Date 6/2/14
Name (Type or Print) Address

[Signature]
Signature

⑦ ANNE BOOKER

1. Applying for an administrative adjustment for a fence playground/ accessory use. The fence surrounds a playground with the following setbacks: The fence is in the North side of the property; with a height of 3' in the south side and 6' in the East and West with a setback of 10'. The North side is at 8' with a setback of 10'9", at the property located at 8040 SW 54th Court, Miami, Florida 33143.

2. Applying for an administrative adjustment for a "Playground accessory use Fence in the East side of the property that has a setback of 48' from the front East side of the property line (75' is required) and a setback of 10'9" from the North side of the property line at the property located at 8040 SW 54th Court, Miami, Florida 33143.

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We, the undersigned property owners, have read (or have had read to us) the information applicable to this request for an Administrative Adjustment from the Zoning Code as applied to the unincorporated area of Miami-Dade County and fully understand that by subscribing my name to this consent form, I am waiving any objection to the proposed construction as outlined above and as shown on the plans accompanying this application. I further certify that I have subscribed my name freely and without any duress or apparent misrepresentation on the part of the applicant to this form and to the plans accompanying this application.

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 Name (Type or Print) Address

[Signature]
 Signature

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 Name (Type or Print) Address

[Signature]
 Signature

③ VACANT STREET Calde Sac _____ Date _____
 Name (Type or Print) Address

④ Michael Agha 5521 SW 81 Terrace, MIAMI, FL 33143 Date 6-8-14
 Name (Type or Print) Address

[Signature]
 Signature

⑤ Fernando Vria 5500 SW 80th Ave Date 6/2/14
 Name (Type or Print) Address Miami FL 33143

[Signature]
 Signature

⑥ PATRICK HUGHES 5480 SW 80th St Date 6/2/14
 Name (Type or Print) Address MIAMI, FL 33143

[Signature]
 Signature

⑦ DANIEL BOOKER _____
 Name (Type or Print) Address

[Signature]
 Signature

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for CONNALL