



6601 Main Street • Miami Lakes, Florida, 33016
Office: (305) 364-6100 • Fax: (305) 558-8511
Website: www.miamilakes-fl.gov



PLANNING AND ZONING PUBLIC HEARING APPLICATION

File # _____
Date Received 12/30/16
Zone 6017-0001 Date of Pre-application Meeting

NOTE TO APPLICANTS: A pre-application meeting with the Town's Planning and Zoning Department staff is required prior to official application filing. Please call 305 364-6100 for an appointment.

1. Name of Applicant The Graham Companies c/o Luis Martinez
a. If applicant is owner, give name exactly as recorded on deed.
b. If applicant is lessee, attach copy of valid lease of 1 year or more and Owner's Sworn-to-Consent form.
c. If applicant is corporation, partnership, limited partnership, or trustee, a separate Disclosure of Interest form must be completed.

Mailing Address 6843 Main Street

City Miami Lakes State Florida ZIP 33014

Tel. # (during working hours) 305-821-1130 Other _____

E-Mail: luism@grahamcos.com Mobile #: _____

2. Name of Property Owner same as above

Mailing Address _____

City _____ State _____ ZIP _____

Tel. # (during working hours) _____ Other _____

3. Contact Person c/o Robert Elias, Esq. (The Elias Law Firm, PLLC)

Mailing Address 15500 New Barn Road, Suite 104

City Miami Lakes State Florida ZIP 33014

Tel. # (during working hours) 305-823-2300 Other 305-403-0080 (direct)

E-Mail: relas@eliaslaw.net Mobile #: 305-987-7411

4. LEGAL DESCRIPTION OF THE PROPERTY COVERED BY THE APPLICATION

- a. If subdivided, provide lot, block, complete name of subdivision, plat book and page number.
b. If metes and bounds description, provide complete description (including section, township, and range).
c. Attach a separate typed sheet, if necessary. Please verify the accuracy of your legal description

See Exhibit "A" attached hereto as to legal description for the Property.

5. Address or location of property (including section, township, and range): _____
Section 22 Township 52 Range 40
6. Size of property: _____ × _____ Acres ± 9.445
7. Date subject property ☒ acquired or ☐ leased _____ day of 1981
Term of lease; _____ years/months.
8. Does property owner own contiguous property to the subject property? If so, give complete legal description of entire contiguous property. (If lengthy, please type on a sheet labeled "Contiguous Property.")
Yes. See Exhibit "B" attached hereto.
9. Is there an option to ☐ purchase or ☐ lease the subject property or property contiguous thereto? ☐ Yes ☒ No
If yes, who are the potential purchasers or lessees? (Complete section of Disclosure of Interest form, also.)

10. Present zoning classification(s): IU-C Present land use classification(s): Industrial and Office
11. REQUEST(S) COVERED UNDER THIS APPLICATION:
Please check the appropriate box and give a brief description of the nature of the request in the space provided. Be advised that all zone changes require concurrent site plan approval.
- ☒ District Boundary (Zone) Change(s):
Zoning Requested: Rezone to RM-36
- ☒ Future Land Use Map (FLUM) Amendment:
Future Land Use Requested: Amend to "Medium Density - Residential" classification (See Level of Service Analysis enclosed as Exhibit "C")
- ☒ Site Plan Approval: Age-restricted rental units
- ☐ Variance _____
- ☐ Preliminary Plat Approval: _____
- ☐ Final Plat Approval: _____
- ☐ Modification of Previous Resolution/Plan/Ordinance _____
12. Has a public hearing been held on this property within the last year and a half? ☐ Yes ☒ No
If yes, applicant's name _____ Date of Hearing _____
Nature of Hearing _____
Decision of Hearing _____ Resolution # _____
13. Is this hearing being requested as a result of a violation notice? ☐ Yes ☒ No
If yes, give name to whom violation notice was served _____
Nature of violation _____
14. Are there any existing structures on the property? ☐ Yes ☒ No
If yes, briefly describe _____
15. Is there any existing use on the property? ☒ Yes ☐ No
If yes, what is the use and when was it established? Agricultural/Cows 1981

**OWNERSHIP AFFIDAVIT
FOR
INDIVIDUAL**

STATE OF FLORIDA

Public Hearing No. _____

COUNTY OF MIAMI-DADE

Before me, the undersigned authority, personally appeared, hereinafter the Affiants, who being first duly sworn by me, on oath, depose and say:

1. Affiants are the fee owners of the property which is the subject of the proposed hearing.
2. The subject property is legally described as: _____

3. Affiants understand 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

Print Name

Signature

Print Name

Sworn to and subscribed before me on the _____ day of _____, 20____. Affiant is personally known to me or has produced _____ as identification.

Notary
(Stamp/Seal)

My Commission Expires: _____

Witnesses:

Signature

Print Name

Signature

Print Name

Sworn to and subscribed before me on the _____ day of _____, 20____. Affiant is personally known to me or has produced _____ as identification.

Notary
(Stamp/Seal)

My Commission Expires: _____

**OWNERSHIP AFFIDAVIT
FOR
TRUSTEE**

STATE OF _____

Public Hearing No. _____

COUNTY OF _____

Before me, the undersigned authority, personally appeared _____, hereinafter the Affiant, who being duly sworn by me, on oath, deposes and says:

1. Affiant is the Trustee of the Trust which owns the property which is the subject of the proposed hearing.
2. Affiant is legally authorized as Trustee to apply for the proposed hearing.
3. The subject property is legally described as: _____

4. 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

Affiant's Signature

Print Name

Print Name

Signature

Print Name

Sworn to and subscribed before me on the _____ day of _____, 20____. Affiant is personally known to me or has produced _____ as identification.

Notary Public, State of _____

My Commission Expires:

Print Name

**OWNERSHIP AFFIDAVIT
FOR
CORPORATION**

STATE OF FLORIDA

Public Hearing No. _____

COUNTY OF MIAMI-DADE

Before me, the undersigned authority, personally appeared, hereinafter the Affiants, who being first duly sworn by me, on oath, depose and say:

1. Affiants are the fee owners of the property which is the subject of the proposed hearing.
2. The subject property is legally described as: See Exhibit "A" attached hereto.

3. Affiants understand 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

Print Name

Signature

Print Name

Sworn to and subscribed before me on the 29th day of December, 2016. Affiant is personally known to me or has produced _____ as identification.

Notary
(Stamp/Seal)



Selene C. Alberto
Commission # FF077831
Expires: Dec. 18, 2017
www.AARONNOTARY.com

My Commission Expires: 12/18/17

Witnesses:

Signature

Print Name

Signature

Print Name

Sworn to and subscribed before me on the _____ day of _____, 20____. Affiant is personally known to me or has produced _____ as identification.

Notary
(Stamp/Seal)

My Commission Expires: _____

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 similar entities, further disclosure shall be made to identify the natural persons having the ultimate ownership interest.]

CORPORATION NAME: The Graham Companies

NAME AND ADDRESS: 6843 Main Street,

Percentage of Stock

Miami Lakes, Florida 33014

See Exhibit "D" attached hereto.

If a TRUST or ESTATE owns or leases the subject property, list the trust beneficiaries and 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: _____

NAME AND ADDRESS: _____

Percentage of Interest

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

PARTNERSHIP OR LIMITED PARTNERSHIP NAME: _____

NAME AND ADDRESS: _____

Percent of Ownership

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 corporation, trusts, partnerships, or similar entities, further disclosure shall be made to identify natural persons having 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 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.

Signature: [Signature] CHRIS O. MADRUGA / Sr. EXECUTIVE VICE PRESIDENT
(Applicant)

Sworn to and subscribed before me this 29th day of December 2016. Affiant

is personally known to me or has produced _____ as identification.

[Signature]
(Notary Public)

My commission expires 12/18/17



Selene C. Alberto
Commission # FF077831
Expires: Dec. 18, 2017
WWW.AARONNOTARY.com

* 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 or 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 percent (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 interests which exceed five percent (5%) of the ownership interests in the partnership, corporation, or trust.



Town of Miami Lakes
PLANNING ZONING AND CODE COMPLIANCE
6601 Main Street
Miami Lakes, FL 33014
(305) 364-6100

10:01 am

RECEIPT
Receipt No: R15023

Case No: **ZONE2017-0001**

Receipt Date: **01/03/2017**

Project Type: **REZONING**

Paid By: **THE GRAHAM COMPANIES/LUIS MART**

Project Subtype:

Pay Method: **CHECK**

No.: **147983**

Folio No: **3220220080013**

Collected By: **MELBA SANCHEZ**

Site Address: , **MIAMI LAKES, FL 33016**

Applicant Information

GRAHAM COMPANIES/LUIS MARTINEZ
6843 MAIN ST
MIAMI LAKES, FL 33014

Main Contact

ROBERT ELIAS
15500 NEW BARN RD
MIAMI LAKES, FL 33014

Owner Information

THE GRAHAM COMPANIES
6843 MAIN ST
MIAMI LAKES,, FL 33014-2048

Description:

THE RESIDENCE SENIOR CTR

Fee

Amount Paid

ZONE- NON-RES, COST RECOVERY

\$5,000.00

THE FACE OF THIS CHECK IS PRINTED BLUE. THE BACK CONTAINS A SIMULATED WATERMARK



Graham Companies

6843 Main Street
Miami Lakes, FL 33014-2048

BankUnited
7765 NW 148 Street
Miami Lakes, FL 33016

63-9059/2670

147983

12/01/2016

\$5,000.00***

Pay to the Order Of: ****** FIVE THOUSAND AND 00/100 DOLLARS**

Town Of Miami Lakes
6601 Main Street
Miami Lakes, FL 33014

Void After 90 Days/Two Signatures Required If Over \$50,000

⑈ 147983 ⑈ ⑆ 267090594 ⑆ 0659903628 ⑈

Total Amount Paid

\$5,000.00

www.miamilakes-fl.gov