



**Public Works Department  
REAL PROPERTY SECTION**  
115 South Andrews Avenue (Room 501-RP)  
Ft. Lauderdale, FL 33301  
Phone 954-357-6826 FAX 954-357-5544

Office Use Only  
Date Application Accepted:  
**06-12-2017**

**Application Number: 2017-V-09**

**APPLICATION FOR VACATION AND ABANDONMENT**

- A.  Vacation of Plats, or any Portion Thereof (BCAC 25.99)
- B.  Abandonment of Streets, Alleyways, Roads or Other Places Used for Travel (BCAC 25.100)
- C.  Release of Public Easements and Private Platted Easements or Interests (BCAC 25.101)

**PETITIONER INFORMATION**

**Petitioners (Owners):**

Petitioner 1: WASTE MANAGEMENT INC OF FLORIDA	Folio(s): 4842 2828 0010
Address: 2700 WILES ROAD	Phone: 954-984 2029
Address (cont'd):	Fax:
City, State Zip: POMPANO BEACH, FL 33073	Email: DeBock, Luke <ldebock@wm.com>

Important: Proof of Property Ownership required.  
Note: For Co-Petitioners/Owners, complete additional Petitioner/Owner Information page(s).

**AGENT INFORMATION**

**Agent for Petitioners:**

Contact Person: CATHERINE A. DONN	Phone 1: 954-739-6400
Address: 3563 NW 53 STREET	Phone 2:
Address (cont'd):	Fax:
City, State Zip: FT LAUDERDALE, FL 33309-6311	Email: cdonn@craventhompson.com

Note: Proof of Agent Authorization by Petitioners required.

**PROPERTY INFORMATION**

**Vacation Requested:** (brief description) Vacation of a portion of a vacant 10' platted utility easement, lying within PB 179-67, BCR.

Section: 28	Township: 48 S	Range: 42 E
Approximate Street Address: 1951 N POWERLINE ROAD		
Location:	<input checked="" type="checkbox"/> Municipality	<input type="checkbox"/> Unincorporated Broward County
Folio Number(s): 4842 2828 0010		
Plat: DELTA POMPANO, PB 179-67		
Surveyor/Mapper: CRAVEN THOMPSON & ASSOCIATES, INC.		
Legal Description Attached:	<input checked="" type="checkbox"/> Full <input checked="" type="checkbox"/> Short	Zoning: I-1 Land Use: INDUSTRIAL

Reason for Vacation (be specific): The easement has never been used, as the area around the easement has been vacant land for many years, and the easement is now in conflict with a new proposed development.

First Application?  Yes  No If No, previous Application No:

**NOTE: Please type/print clearly. Application must be complete and accurate for acceptance.**

ADDITIONAL PETITIONER INFORMATION	
Petitioner 2:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 3:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 4:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 5:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 6:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 7:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:
ADDITIONAL PETITIONER INFORMATION	
Petitioner 8:	Folio(s):
Address:	Phone:
Address (cont'd):	Fax:
City, State Zip:	Email:



PETITIONER ACKNOWLEDGMENT (By Individual)

State \_\_\_\_\_

County \_\_\_\_\_

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, \_\_\_\_\_

(name), who being first duly sworn by me this day, depose and state that s/he is the Petitioner in the foregoing Application for Vacation and Abandonment.

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_

20\_\_\_\_, by \_\_\_\_\_

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

NOTARY  
(SEAL)

Print Name: \_\_\_\_\_

Notary Public in and for the County and State last aforesaid.

My Commission Expires: \_\_\_\_\_

Serial No., if any: \_\_\_\_\_

PETITIONER ACKNOWLEDGMENT (By Business or Government Entity)

State FLORIDA  
County BROWARD

I hereby certify that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, TIMOTHY B. HAWKINS, PRESIDENT (name)  
as \_\_\_\_\_ (title)  
of WASTE MANAGEMENT INC OF FLORIDA (name of entity),  
a FLORIDA PROFIT CORPORATION (type of corporation/partnership/government),  
on behalf of the business or government entity, who being first duly sworn by me this day, deposes and states that s/he is authorized on behalf of the business or government entity as Petitioner(s) in the foregoing Application for Vacation and Abandonment.

The foregoing instrument was acknowledged before me this 3<sup>RD</sup> day of APRIL, 2017  
20  , by TIMOTHY B. HAWKINS, PRESIDENT  
who is  personally known to me or  has produced \_\_\_\_\_  
as identification.

NOTARY  
(SEAL)



SUSAN CHRISTA JOHNSON  
MY COMMISSION # FF 065349  
EXPIRES: January 29, 2018  
Bonded Thru Budget Notary Services

Print Name: Susan Christa Johnson

Notary Public in and for the County and State last aforesaid.

My Commission Expires: \_\_\_\_\_

Serial No., if any: \_\_\_\_\_

AFFIDAVIT TO AUTHORIZE PETITIONER(S) AGENT

I/We, WASTE MANAGEMENT INC OF FLORIDA

\_\_\_\_\_, the property owner(s) of property to be vacated in the subject Application for Vacation and Abandonment, being duly sworn, depose(s) and say(s):

1. That I/we am/are the owner(s) and record title holder(s) of the lands that are to be vacated and abandoned. my/our Folio Number(s) is/are as follows: 4842 2828 0010
2. That I/we do hereby appoint the following Agent to act on my/our behalf in the processing of the subject Application for Vacation and Abandonment to Broward County Board of Commissioners:

Name:  CRAVEN THOMPSON & ASSOCIATES, INC.   
 Address:  3563 NW 53 STREET   
 City, State Zip:  FORT LAUDERDALE, FL 33309-6311   
 Telephone:  954-739-6400   
 Contact Person:  Catherine A. Donn

**WASTE MANAGEMENT INC. OF FLORIDA**

Name of Petitioner/Owner(s)

By     
 (signature)  
**TIMOTHY B. HAWKINS, PRESIDENT**  
 (print name)

3<sup>RD</sup>  day of  APRIL , 20  17

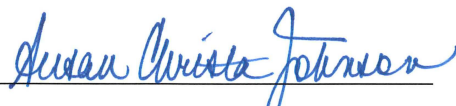
State  FLORIDA   
 County  BROWARD

The foregoing instrument was acknowledged before me this  3<sup>RD</sup>  day of  APRIL, 2017   
 20\_\_ by **TIMOTHY B. HAWKINS, PRESIDENT**  
 who is  personally known to me or  has produced \_\_\_\_\_  
 as identification.

NOTARY  
(SEAL)



SUSAN CHRISTA JOHNSON  
 MY COMMISSION # FF 065349  
 EXPIRES: January 29, 2018  
 Bonded Thru Budget Notary Services

Print Name:     
 Notary Public in and for the County and State last aforesaid.  
 My Commission Expires: \_\_\_\_\_  
 Serial No., if any: \_\_\_\_\_