



**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:
3-28-2017

Application Number: 2017-V-03

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 two 20' Broward County Drainage Maintenance Easements - OR 5986-131, BCR and OR 7332-252, BCR, the portions 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: Full Short Zoning: I-1 Land Use: INDUSTRIAL

Reason for Vacation (be specific): The easements were dedicated in 1974 and 1977 when there was a large drainage lake existing on the site. The lake is now filled, so there is no need for the maintenance easements.

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:

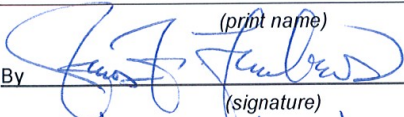
The undersigned Petitioner(s) has fully reviewed the Instructions concerning the Application for Vacation and Abandonment and understands that the Application must be complete and accurate prior to Broward County acceptance and review. The undersigned hereby petitions the Broward County Board of County Commissioners to vacate and abandon the property described herein. By signing as Petitioner(s), the undersigned certifies authenticity of ownership and, when applicable, authorizes the Agent to be its representative in this Application to Vacate and Abandon process.

PETITIONER/OWNER(S)

11-17-2016 WASTE MANAGEMENT INC OF FLORIDA
Date Petitioner

Witness

Witness

(print name)
By 
(signature)

James F. Lambros, V.P.
(print signer's name)

~~_____
Date Petitioner~~

~~_____
Witness~~

~~_____
Witness~~

~~_____
(print name)~~

~~By _____
(signature)~~

~~_____
(print signer's name)~~

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, JAMES F. LAMBROS

_____ (name)
as VICE PRESIDENT _____ (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 17TH day of NOVEMBER
2016 by JAMES F. LAMBROS
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]
 (signature)
 James F. Lambros, V.P.
 (print name)

17TH day of NOVEMBER , 20 14

State FLORIDA
 County BROWARD

The foregoing instrument was acknowledged before me this 17TH day of NOVEMBER
 20 14 , by JAMES F. LAMBROS
 who is personally known to me or I has produced _____
 as identification.



Print Name: Susan Christa Johnson
 Notary Public in and for the County and State last aforesaid.
 My Commission Expires: _____
 Serial No., if any: _____