

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: 11-15-2017

Application Number: 2018-V-01

L O R | D A

- 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):	ымалын орга жийик са Америо са шиж шим кезо шук тап рекезгей ин пониметов чорга америалык аналага					
Petitioner 1: CITY OF HALLANDALE BEACH	Folio(s): 5142 2747 0010					
Address: c/o Gregg Harris, Capital Projects Manager	Phone: (954) 457-3029					
Address (cont'd): 400 South Federal Highway	Fax:					
City, State Zip: Hallandale Beach, FL 33009 Email: gharris@cohb.org						
Important: Proof of Property Ownership required. Note: For Co-Petitioners/Owners, complete additional Petitioner/Owner Information	n page(s).					

AGENT INFORM	ATION					
Agent for Petitioners: CRAVEN THOMPSON & ASSOCIATES, INC.						
Contact Person: CATHERINE A. DONN	Phone 1:954-739-6400 x 379					
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 perimeter platted utility easement, with segments being 10' and 12' wide, dedicated per PB 174-132, BCR.								
Section: 27	Township: 51 S	Range:	42 E					
Approximate Street Address: SE 7 ST, Hallandale Beach, FL 33009								
Location:	Municipality		Unincorporated Broward County					
Folio Number(s): 514	2 2747 0010							
Plat: 601 Old Federa	Plat: 601 Old Federal Highway Plat, PB 174-132, BCR							
Surveyor/Mapper: CR	Surveyor/Mapper: CRAVEN THOMPSON & ASSOCIATES, INC. (for easement vacation purposes)							
Legal Description Attac	ched: V Full V Short	Zoning: RM-25	Land Use: ACTIVITY CENTER					
Reason for Vacation (be specific): The easements were dedicated by plat when a hi-rise residential development was planned, but never built. No utilities exist in the easements; the city wants to redevelop/expand their park.								
First Application? 🗸 Yes 🗌 No If No, previous Application No:								

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

//		
9/11/12	CITY OF HALLANDALE BEACH	Nydia Rafols-Sallaberry, Interim City Manager
Date	Petitioner	By MAN M. Fay M ha My M 09 14 1B (signature) GN & G HARRES
	Witness	(Witness print name)
		Marthiw Cohen
	Witness	(Witness print name)
Date	Petitioner	(print name)
		Ву
	Witness	(signature)
	Witness	(print signer's name)

PETITIONER ACKI	NOWLEDGMENT (By Individual)
State	
County	
I hereby certify that on this day personally appeared lacknowledgments,	before me, an officer duly authorized to administer oaths and take
(name), who being first duly sworn by me this day Application for Vacation and Abandonment.	y, depose and state that s/he is the Petitioner in the foregoing
The foregoing instrument was acknowledged before in 20 , by	ne thisday of
who is	
NOTARY (SEAL)	Notary Signature: 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	
hereby cer acknowledg	, , , , , , , , , , , , , , , , , , , ,	ared before me, an officer duly authorized to administer oaths and take
Nydia Rafo	ols-Sallaberry	(name)
	City Manager	(title)
	HALLANDALE BEACH	(name of entity),
	A MUNICIPALITY	(type of corporation/partnership/government),
		who being first duly sworn by me this day, deposes and states that s/he
		nment entity as Petitioner(s) in the foregoing Application for Vacation and
Abandonme	ent.	
20 <mark>16</mark> , by <u>N</u> who is 7 pe	ersonally known to me or 🦳 has prod	lanager, for the City of Hallandale Beach, a Florida Municipal corporation
as identifica	ation.	
and the second	NOTARY CARIDAD SANTIAGO Notary Public - State of Florida	Notary Signature: Landad Santago
1/2	14.3 Commission # FF 216392	
1/1/2	My Comm Expires May 8, 2018	Notary Public in and for the County and State last aforesaid
1 3.8%	Bonded through National Notary Asen.	My Commission Expires: May 8, 2019
		Serial No., if any:

AFFIDAVIT TO AUTHORIZE PETITIONER(S) AGENT

I/We,	Ν	lydia Rafols-Sa	llaberry, as Interim City Ma	nager for the CITY OF HALLANDALE BEACH, a				
Flor	ida	a Municipal cor	poration	, the property owner(s) of				
prop	property to be vacated in the subject Application for Vacation and Abandonment, being duly sworn, depose(s) and say(s):							
	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: 5142 2747 0010							
:	2.			act on my/our behalf in the processing of the subject ard 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					
		City of Hallar	ndale Beach					
	Name of Petitioner/Owner(s) By (signature) Nydia Rafols-Sallaberry							
		(pri	nt name)					
		day of h	<u>ember</u> , 20 <u>B</u>					
State		FLORID	A					
Coun	ty	BROWA	ARD					
20 who is	, b	y Nydia Rafols-Sa	vas acknowledged before me this illaberry, as Interim City Manager n to me or has produced	14 day of				
	•	NOT	ARY	Notary Signature: Luil A with yo				
	3	Motory Motory	ARIDAD SANTIAGO	Print Name: CARIDAD SANTIAGO				
		E Com	Public - State of Florida mission # FF 216352	Notary Public in and for the County and State last aforesaid.				
	1	Bonded to	nm. Expires May 8, 2019 Prough National Notary Assn.	My Commission Expires: May 81 2019				
		CHINA CONTRACTOR OF THE CONTRA	AND THE PROPERTY OF THE PARTY O	Social No. if any:				