

IMPORTANT NOTICE TO APPLICANT:

THIS APPLICATION CONSISTS OF TWO (2) PAGES. BOTH PAGES MUST BE COMPLETED AND SUBMITTED IN ORDER TO PROCESS

Submittal deadline for this application and all associated documentation is Monday, 9:00AM. The fee amount will be calculated once this application is received and processed. In order for this item to be placed on the next available Plat Committee Agenda, the full correct fee must be paid no later than the following day, Tuesday, noon time. Failure to submit this form and fees by the aforementioned deadlines will result in this item not being placed on the next available Plat Committee agenda.

FOR OFFICIAL USE ONLY:	
Agenda Date:	_____
Tentative No.: T-	_____
Received Date:	_____

Number of Sites : (1)

APPLICATION FOR PLAT OF SUBDIVISION DEVELOPMENT

Municipality: UNINCORPORATED MIAMI-DADE COUNTY Sec.: 11 Twp.: 56 S. Rge.: 39 E. / Sec.: Twp.: S. Rge.: E.

1. Name of Proposed Subdivision: BUSH ESTATES

2. Owner's Name: BUSH 134 ,LLC Phone: 305 786 4459

Address: 13003 SAMBRANA ST City: CORAL GABLES State: FL Zip Code: 33156

Owner's Email Address: JCARRO47@GMAIL.COM

3. Surveyor's Name: E R BROWNELL AND ASSOC ,INC Phone: 305 860 3866

Address: 4957 SW 74 CT City: MIAMI State: FL Zip Code: 33155

Surveyor's Email Address: ALOPEZ@ERBROWNELL.COM

4. Folio No(s): 30-6911-000-0111 / 30-6911-000-0110 / _____ / _____

5. Legal Description of Parent Tract: WEST1/2 ,SW1/4 ,SE1/4 , SECTION 11 TWP 56 S, RGE 39 E , MIAMI DADE COUNTY ,FL ,

6. Street boundaries: SW 134 AVE /208 ST

7. Present Zoning: EUM Zoning Hearing No.: CZAB 14 5 22 (R-2023 000087)

8. Proposed use of Property:
Single Family Res.(10 Units), Duplex(3 Units), Apartments(_____ Units), Industrial/Warehouse(_____ Square .Ft.),
Business(_____ Sq. Ft.), Office(_____ Sq. Ft.), Restaurant(_____ Sq. Ft. & No. Seats _____), Other (_____ Sq. Ft. & No. of Units _____)

9. Does the property contain contamination? YES: NO:

NOTE: Attach list of all plat restrictions zoning conditions or any other declarations, restrictions, covenants that might affect this Tentative Plat.

Any soil groundwater or surface water contaminants exceeding standards or criteria outlined in local, state, and/or federal law, shall be disclosed. Furthermore, any portion of the of the property to be conveyed (including right-of-way) must be identified, and the receiving entity must be made aware of the contamination and accept the conveyance. Documentation of acceptance from each entity shall be provided with the plat application.

Be advised that Miami-Dade County will not accept the conveyance of contaminated property for right-of-way: right-of-way areas must be fully restored to applicable local, state, and/or federal standards or criteria.

Please note nothing stated herein may be interpreted to limit or restrict an engineer's or other professional's responsibility to prepare plans accurately and completely for proposed right-of-way as well as any other projects or plans. For proposed dedications of non-right-of-way properties, any soil, groundwater or surface water contaminants must be disclosed to the County Department at the earliest stage possible. The presence of any such contamination or delay in disclosure of such contamination could result in the County declining the acceptance of the proposed dedication, the need for the developer to reconfigure or change previously approved site plans, or conduct changes to the proposed development may be required. The applicant may contact the DERM Environmental Monitoring and Restoration Division at 305-372-6700 for additional information.

THIS APPLICATION CONSISTS OF TWO (2) PAGES. BOTH PAGES MUST BE COMPLETED AND SUBMITTED IN ORDER TO PROCESS

I HEREBY CERTIFY that I am the owner of the parcel(s) described in Item 5 and that the information contained in this application is true and correct to the best of my knowledge and belief. If applicable, attached is a list of all the restrictions/ restrictive covenants and declarations in favor of Miami-Dade County. Attached is a copy of the recorded deed showing my acquisition of this land. In addition, I agree to furnish additional items as may be necessary such as abstract or Opinion of Title to determine accurate ownership information. Furthermore, I am aware that the use of a public water supply and/or public sewer system may be required for this development. If so required, I recognize that engineering drawings for the extension of these utilities must be approved by the appropriate utility entity and by D.R.E.R. prior to the approval of the final plat.

Pursuant to Florida Statutes 837.06, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree, punishable as provided in FS. 775.082 or FS. 775.083.

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

SS:

Signature of Owner: [Signature]
(Print name & Title here): JOSE CARRO, MANAGER

BEFORE ME, personally appeared Jose Carro this 25th day of July, 2023 A.D. and (he/she) acknowledged to and before me that (he/she) executed the same for the purposed therein. Personally known or produce as identification and who did (not) take an oath.

WITNESS my hand and seal in the County and State last aforesaid this 25th day of July, 2023 A.D.



Krishna M. Peña
Notary Public
State of Florida
Comm# HH137737
Expires 6/3/2025

Signature of Notary Public: [Signature]
(Print, Type name here: Krishna M. Peña)
6/3/2025 (Commission Expires) HH137737 (Commission Number)

(NOTARY SEAL)

Note: The reverse side of this sheet may be used for a statement of additional items you may wish considered.

