

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: _____

Waiver No. D- _____

Received Date: _____

APPLICATION FOR WAIVER OF PLAT

Municipality: UNINCORPORATED Sec.: ____ Twp.: ____ S. Rge.: ____ E. / Sec.: ____ Twp.: ____ S. Rge.: ____ E.

1. Owner's Name: C and V Multisolutions, LLC Phone: 7864021140
Address: 15100 NE 2nd Ave City: Miami State: FL Zip Code: 33162
Owner's Email Address: vdepradine@yahoo.com
2. Surveyor's Name: Will's Services Group, LLC Phone: (786) 290-4184
Address: 4190 SW 84th Court City: Miami State: FL Zip Code: 33155
Surveyor's Email Address: carlos@cbsservices.com
3. Legal Description of Cutout Tract: Parcel "A" Portion of LOT 14 of "Biscayne Gardens Section "A" according to the plat therefore as recorded in Plat Book 40, at Page 41, of the Public Record of Miami Dade County Florida
4. Folio No(s): 30-2218-002-0190 / _____ / _____ / _____
5. Legal Description of Parent Tract: LOT 14 of "Biscayne Gardens Section "A" according to the plat therefore as recorded in Plat Book 40, at Page 41, of the Public Record of Miami Dade County Florida
6. Street Boundaries: Between NE 152nd Street and NE 151th Street and between NE 2nd Ave and North Miami Ave
7. Present Zoning: RU-1 Zoning Hearing No.: _____
8. Proposed use of Property:
Single Family Res.(_____ Units), Duplex(1 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.

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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 DCFSP 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)

SS:

Signature of Owner: _____

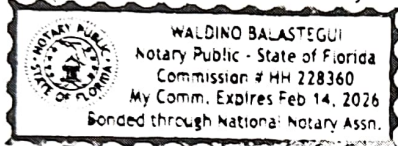
COUNTY OF MIAMI-DADE)

(Print name & Title here):

VICTOR DEPRADINE

BEFORE ME, personally appeared VICTOR DEPRADINE this 3 day of JULY, 2025 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 3 day of JULY, 2025 A.D.



(NOTARY SEAL)

Signature of Notary Public: _____

(Print, Type name here):

WALDINO BALASTEGUI

02-14-26

(Commission Expires)

HH 228360

(Commission Number)

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

01-14-25