## <u>APPLICATION FOR SITE PLAN REVIEW - AMENDMENT</u>

CITY OF PORT ST. LUCIE	P&Z File No. <u>P03-064-A1</u>	
PLANNING & ZONING DEPARTM (772) 871-5213	Fees (Nonrefundable) \$Arch.: \$ Receipt #:	
PROJECT NAME: Med Florida Prof	ssional Center # 3 (F.K.A Prima Vista Fidelity Federal)	
	7,18,19 AND 20, BLOCK 88, PORT ST. LUCIE SECTION TWENTY SEVEN,	
ACCORDING	G TO THE MAP OR PLAT THEREOF AS RECORDED IN PLAT BOOK 14, PAGE(S	
	JGH I, PUBLIC RECORDS OF ST. LUCIE COUNTY, FLORIDA	
	outh of NW Prima Vista Blvd between SW Carmelite Street and SW Peach Street	
PROPERTY TAX I.D. NUMBER:	420-630-0348-000-5	
parking CHARACTER AND INTENL	kpand the existing medical building by 1,912 SF and all applicable ED_spaces.	
IS THIS AFFORDABLE HOUSING STATE OR LOCAL AFFORDABLE	NVOLVING FEDERAL, HOUSING FUNDS?N/A	
GROSS SQ. FT. OF STRUCTURE	(S): 10,535 SF	
NUMBER OF DWELLING UNITS & FOR MULTI-FAMILY PROJECTS:		
UTILITY SUPPLIER:		
	1.57 SF / 68,481 SF ITE:ESTIMATED NO. EMPLOYEES:8	
	N:_ROIZONING DISTRICT: _LMD	
OWNER(S) OF PROPERTY: Afaf Re	Estate Management, LLC by Shikara Family Limited Liability Limited partnership by Shikara mazin, MD	
Name, Address, Telephone & 3889	Military Trail, Suite 104, Jupiter, FL 33458	
Email: msh	kara@mcmhealthcare.com	
APPLICANT OR AGENT OF OWNE Name, Address, Telephone & Email:	R: iPlan & Design, LLC 823 N. Olive Avenue West Palm Beach, FL 33401 561.797.4217 bcheguis@iplananddesign.com	
PROJECT ARCHITECT/ENGINEER (Firm, Engineer of Record, Florida Registration No., Contact	LCA Architect, Inc AA-000 3442	
Person Address Telephone & Ema	Les Czeczyk AIA / 1075 Sepekuwie Wey Suite 100 WDD EL 22411	

Les Czaczyk, AIA / 1975 Sansbury's Way Suite 108, WPB, FL 33411

I hereby authorize the above listed agent to represent me. I grant the planning department permission to access the

property for inspection.

I fully understand that prior to the issuance of a building permit and the commencement of any development, all plans and detail plans must be reviewed and approved by the City pursuant to Sections 158.237 through 158.245, inclusive, of the zoning ordinance.

\*When a corporation submits an application, it must be signed by an officer of the corporation. Corporation signatures must be accompanied with an approved resolution authorizing the individual to sign such applications. NOTE: Signature on this application acknowledges that a certificate of concurrency for adequate public facilities as needed to service this project has not yet been determined. Adequacy of public facility services is not guaranteed at this stage in the development review process. Adequacy for public facilities is determined through certification of concurrency and the issuance of final local development orders as may be necessary for this project to be determined based on the application material submitted

**OWNER'S SIGNATURE** 

Mazin Shi Kana

Manager

DATE