



APPLICATION NUMBER  
20-SE-005

**RECEIVED**  
FEB 13 2020

### SPECIAL EXCEPTION USE APPLICATION FOR

ENTER TYPE OF USE /BUSINESS:

Business Name: CAROM BILLIARDS, Inc.

Business Address: 10023 SW 218 STREET  
Cutler Bay, FL 33190

Business Telephone Number: 786-366-9273

Business Email: victorcuzzi@gmail.com

### APPLICANT AND CONTACT INFORMATION

Applicant Name: Jairo Luis

Applicant Address: 10023 SW 218 street  
cutler Bay, FL 33190

Applicant Telephone Number: 407-925-9397

Applicant Mobile Telephone Number 407-925-9397

Applicant Email address: A\_Bestglass@hotmail.com

### FILL IN BELOW THE CONTACT INFORMATION FOR ANYONE ELSE WHO SHOULD RECEIVE COPIES OF NOTICES /CORRESPONDENCE

Name: Jorge Gonzalez

Address: 7215 NW 7St.  
Miami, FL 33126

Telephone Number: 305-796-4865 Mobile 305-796-4865

Email address: JGonzalez@ABCconstruction.cc

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Mobile \_\_\_\_\_

Email address: \_\_\_\_\_

INFORMATION ABOUT THE USE/ BUSINESS

Business Description (Please list all activities conducted at your business):

Billard Hall with 6 CAROM TABLES +  
Sell Beer + wine + Snacks. + LIGHT FOOD MENU

Date the business opened or is expected to be opened: ASAP

The Days and Hours of operation for the business:

LIST NEXT TO EACH DAY, THE HOURS YOU WILL BE OPEN

LIST NEXT TO EACH DAY THE # OF EMPLOYEES ON DUTY

Sunday	11 AM to 11 PM	2
Monday	11 AM to 11 PM	2
Tuesday	11 AM to 11 PM	2
Wednesday	11 AM to 11 PM	2
Thursday	11 AM to 11 PM	2
Friday	11 AM to 2 AM	2
Saturday	11 AM to 2 AM	2

How many persons will the proposed business employ?

4

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List the job titles and approximate salaries for the proposed employees?

CASHIER - \$ 10 - per hour  
MANAGER - \$ 15 - per hour

Square footage of building space to be occupied by the business : \_\_\_\_\_

### INFORMATION ABOUT THE SITE

Property Owner Name: UNIVERSITY WEST, LLC

Property Owner Street Address: P.O BOX 558087

City, State & Zip Code: Miami, FL 33255

Telephone #: 305-663-0322

Email Jgonzalez@abc.construction

### STANDARDS FOR APPROVAL THE EFFECTS OF YOUR USE/BUSINESS ON THE COMMUNITY

Describe how your business will affect the residents who live close by: \_\_\_\_\_

Resident will be able to come to our Billiard Hall  
enjoy a fun entertaining experience playing CAROM BILLARDS

Describe how this business/use will affect neighboring businesses: \_\_\_\_\_

NO effect NO other business like this in the neighboring  
Area. EXCEPT OUR CUSTOMERS CAN USE OTHER BUSINESSES  
around us also.

What site characteristics make this location suitable for your use/ business: \_\_\_\_\_

Because there are no other in the Area.  
Because its On a major road.  
Because there is good visibility To Traffic

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How will this use/ business affect the community economically?

open Job positions will be available for work.

ADDITIONAL DEMANDS ON UTILITIES, COMMUNITY FACILITIES, AND PUBLIC SERVICES

Describe any fire hazards associated with your business: N/A

Describe what security measures your business will require: Doors have locks, cameras, Alarm for the unit.

Describe any chemicals, fluids, gases or potentially hazardous substances that your business will use or store on site: N/A

Describe any activity in your business that will use water other than normal washing and toilet use N/A

Describe any activity in your business that will utilize City park facilities: N/A

Describe any activity in your business that will generate noise, light or vibration:

N/A

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Describe transit, automobile or pedestrian traffic that your business will create in the area

Shopping center has Ample Parking  
Means for pedestrians to walk within.

Describe any activity in your business that will involve alcohol, music or live entertainment

we will sell beer + wine + have tv  
screens throughout unit, No Live Music.

Describe any other aspects of your business about which you feel that the reviewer should know: N/A

### ATTACH THESE DOCUMENTS TO THIS APPLICATION

1. Site Plan or survey
2. Floor Plan
3. Inventory of Fixtures and Equipment
4. Legal Description
- 5. Certified Mailing list with two (2) sets of labels for all property owners within 300 feet of the site.
6. Copy of Lease (For Applicants who are renting)
7. Copy of Deed or Contract to Purchase (For Applicant who own or intends to own)
8. Letter from property owner authorizing you to apply for a special exception.

**NOTE: STAFF MAY REQUIRE ADDITIONAL INFORMATION.**

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**AFFIDAVIT**

I, JAIRO LENSIS, DO HEREBY SWEAR OR AFFIRM

1. THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND THE ATTACHMENTS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
2. CONSISTENT WITH THE LAND DEVELOPMENT REGULATIONS OF THE CITY OF LAUDERHILL, FLORIDA, SPECIFICALLY, SCHEDULE E, SUBSECTION 5.(9), PARAGRAPH (B), I WILL CAUSE A SIGN AT LEAST THREE (3) SQUARE FEET IN SIZE TO BE POSTED ON THE SUBJECT PROPERTY FACING AND VISIBLE FROM THE STREET AT LEAST TEN (10) DAYS PRIOR TO THE PUBLIC HEARING. MOREOVER, I CERTIFY THE SIGN WILL REMAIN POSTED FOR THE DURATION OF THE TIME REQUIRED FOR THE POSTING ON THE SUBJECT PROPERTY AND A PHOTOGRAPH OF THE SIGN POSTED ON THE SUBJECT PROPERTY WILL BE PROVIDED TO THE CITY OF LAUDERHILL PLANNING AND ZONING DEPARTMENT AT LEAST SEVEN (7) DAYS PRIOR TO THE PUBLIC HEARING.
3. I WILL CAUSE THIS SAME SIGN TO BE REMOVED WITHIN SEVEN (7) CALENDAR DAYS AFTER THE HEARING.

PRINT YOUR NAME: JAIRO LENSIS

SIGN YOUR NAME: [Signature]

DATE: 2/10/2020

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 10 DAY OF February, 20 20, BY JAIRO LENSIS, WHO IS PERSONALLY KNOWN TO ME OR WHO HAS PRODUCED FLD - - - - 1910 AS IDENTIFICATION AND WHO DID TAKE AN OATH.

NOTARY PUBLIC SIGN: [Signature]

PRINT: RINKUBEN PATEL

STATE OF FLORIDA AT LARGE SEAL

MY COMMISSION EXPIRES:



**YOUR SUBMISSION**

1. The original application with Attachments 1 -8 .
2. A check made payable to the City of Lauderhill for the appropriate fee amount.

