

SPECIAL EXCEPTION USE AFFIDAVIT OF COMPLIANCE WITH CONDITIONS OF APPROVAL

[Classic Billiards] (25-SE-015)

I, _____, being sworn, do hereby certify and affirm that the following statements are true:

I have read in its entirety the [Classic Billiards, 25-SE-015] Development Review Report, any Supplemental Development Review Reports, and all attachments and exhibits associated with the special exception use application filed with the City of Lauderhill, Florida Planning and Zoning Division and understand its contents. *I further acknowledge that Special Exception Use applications are reviewed and will be subject to approval by the Lauderhill City Commission in a quasi-judicial hearing and my attendance at the hearing, or the attendance of my representative or designee, is required to ensure all facts pertaining to the matter are put on record.*

I have read and understand the below described conditions of approval and voluntarily agree to comply with all said conditions. I understand that no Special Exception will be executed or approved in final until and unless this signed Affidavit is submitted to the City:

1. This special exception use development order to allow the Billiard or Pool Parlor is specifically granted to Sun Village Plaza, LLC for the Units of 4561-4575 N. University Drive.
2. The Billiard or Pool Parlor Use is restricted to a total of 10,106 square feet site located at 4561-4575 N. University Drive. Consistent with the Land Development Regulations Article IV., Part 4.0., Section 4.3., the expansion, alteration, enlargement or removal to another location of this use shall be unlawful unless the City Commission amends this development order to allow such expansion, alteration, enlargement or removal to another location. Seating must be consistent with state licensing requirements.
3. The Billiard or Pool Parlor hours of operation are Sunday through Saturday from 1:00PM to 2:00AM. Alcoholic beverage sales will be limited the days and hours imposed by Land Development Regulations Article III., Part 5.0., Subsection 5.3.1.A.
4. Alcoholic Beverage sales which are allowed by right in association with the existing associated Restaurant Bar Use must be in conformance with the requirement that 51% of sales must be food and nonalcoholic beverages.
5. Seating must be consistent with state DBPR licensing requirements.

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6. Live Entertainment is prohibited unless a Special Exception is applied for and granted for said use.
7. Gambling is prohibited
8. A maximum number of six (6) amusement devices are permitted on premises. The City must be notified if any such devices are to be utilized so they can be included within the Certificate of Use.
9. If there are any code enforcement violations or liens, this Special Exception Use Development Order may be brought before the City Commission to be reconsidered, at which time the development order, or the conditions of approval, may be subject to modification, suspension and/or revocation.
10. Any violation of these conditions of approval may result in a public hearing before the City Commission and may result in the modification, suspension or revocation of this special exception use development order or its conditions or both.
11. The owner shall execute a trespass agreement for the police department to keep on file for enforcement.
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Any violation of these conditions may result in a public hearing before the City Commission in order to determine whether this special exception use development order should be revoked, suspended or modified.

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I understand that I am swearing or affirming under oath the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement may include the modification, suspension or revocation of any resolution adopting the special exception use application and any certificate of use associated with the special exception use approval.

Print your name: _____

Sign your name: _____

Date signed: _____

The foregoing instrument was acknowledged before me this _____ day of _____, 202____, by _____, who is personally known to me or who has produced _____ as identification and who did take an oath.

Notary public

Print your name: _____

Sign your name: _____

State of Florida at Large Seal

My Commission Expires: _____