



OFFICE OF PLANNING  
HOLLYWOOD, FLORIDA  
GENERAL APPLICATION

This application must be completed in its entirety and submitted along with all necessary documents in order for it to be processed. **THIS APPLICATION WILL NOT BE PLACED ON A BOARD OR COMMITTEE'S AGENDA UNTIL IT IS COMPLETE.** Refer to the checklist for the appropriate Board/Committee to determine the supplemental documentation required with each application. Staff will provide the appropriate checklist for each type of application. Plans submitted shall be signed and sealed by an architect or engineer registered in the State of Florida. The applicant of record or their authorized legal agent shall present projects to the pertinent Board/Committee.

For after the fact applications the responsible contractor/agent/architect or engineer of record should be present at the Board/Committee hearing. Their failure to attend may impact upon the disposition of your application. Once placed on an agenda, the applicant or their authorized legal agent must be present at all meetings.

APPLICATION TYPE (CHECK ONE):

- Development Review Board
- Planning and Zoning Board
- Concurrency Review Committee
- Historic Preservation Board
- Technical Advisory Committee
- City Commission

Location Address: 819 N. 14<sup>th</sup> Ave Hollywood Zip Code: 33020  
 Lot(s): 15+16 Block: 16 Subdivision: Hollywood Lakes Sec 1-32 B  
 Folio Number(s): 514214012770

Zoning Classification: \_\_\_\_\_ Land Use Classification: \_\_\_\_\_

1. Explanation of Request: Remove Existing "S" Type Concrete Tile Roofing, Install "S" Type Metal Tile  
 NUMBER OF UNITS: 1 SQ FT: 1900
2. Value of Improvement: 34,649.00 Estimated Date of Project Completion: 2/1/09
3. Will Project be Phased?: No If Phased, Estimated Completion of Each Phase: \_\_\_\_\_

4. Name of Current Property Owner: Peter Catallo  
 Address of Property Owner: 819 N. 14<sup>th</sup> Ave Hollywood Florida Zip Code: 33020  
 Business Telephone: \_\_\_\_\_ Home: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

5. Name of Consultant (Representative) Tenant (circle one): Frank H. McKinney  
 Address of Consultant/Representative/Tenant: 2321 NE 29<sup>th</sup> Ave Ocala Zip Code: 32470  
 Business Telephone: 352-624-9800 Home: 813-299-1773 Fax: 352-624-9802  
 Email Address: fhm@solarshieldroofing.com

6. Date of Purchase: \_\_\_\_\_ Is there an option to purchase the Property Yes (  ) No (  )