



WELLINGTON

WELLINGTON SPECIAL PERMIT USE RENEWAL

Planning and Zoning Division
12300 Forest Hill Blvd., Wellington, FL 33414 (561) 791-4000 pzapplications@wellingtonfl.gov

I. PROPERTY OWNER/AGENT INFORMATION

Property Owner(s) of Record: Southfields Polo, LLC

Address: 3629 Aiken Road City: Wellington ST: FL Zip: 33414

Phone: _____ Cell Phone: (561)373-0303 Fax: _____

Applicant if other than owner(s): Same

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ Cell Phone: _____ Fax: _____

Agent Name: Maureen Gross

Company Name: Phelps Media Group

Address: 12012 South Shore Blvd. City: Wellington ST: FL Zip: 33414

Phone: (561)753-3389 Cell Phone: (561)714-0887 Fax: (561)753-3386

Consultants: If applicable to your request, please attach a separate list of all consultants that will provide information on this request. You should include the name, address, telephone number and fax number as well as the type of professional service provided.

II. PROPERTY LOCATION

A. Property Control Number (PCN): If additional PCN's, list on a separate sheet and attach to the application.
PCN: [7] [3] - [4] [1] - [4] [4] - [2] [1] - [0] [9] - [0] [0] [0] [0] [0] [0]

B. Section 21 Township 44 Range 41 Total Acreage of Subject Property 30.69

C. Project Name: Polo Event Previous Petition #: _____

D. Project Address: 13444 Southfields Road Wellington, FL 33414

E. General Location Description (proximity to closest major intersection, in miles or fractions thereof):

Located within the Southfields subdivision on Aiken Road, East of South Shore Blvd. and North of Lake Worth Road

III. LAND USE AND ZONING INFORMATION

A. Zoning Designation: AR/PUD/EOZD Future Land Use Designation: Commercial Rep Is Property within the EOZD? Y

B. Existing Use(s) on Property: Polo Field

C. Proposed Use(s): Polo Event

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IV. ADDITIONAL INFORMATION

The following information is required as part of this application:

A. Standards for Review

Failure of the proposed special use to meet any standard below shall be deemed adverse to the public interest and the application shall not be approved. A letter verifying the decision of the Planning & Zoning Manager to approve, approve with conditions, or deny the application will be sent to the applicant. The applicant shall explain how the request is consistent with the following:

1. **Consistency with Wellington Comprehensive Plan**—the proposed Special Permit Use is consistent with the purposes, goals, objectives and policies of the Comprehensive Plan.

The proposed special event is consistent with the Village of Wellington comprehensive plan.

2. **Complies with supplementary use standards**—the proposed Special Permit Use complies with all relevant and appropriate portions of LDRS Section 6.4, Use Regulations & Definitions and Section 6.6 Supplementary Regulations.

The temporary erection of tents, etc. shall be in accord with all regulatory set-backs.

3. **Compatibility with surrounding uses and zones**—the proposed Special Permit Use is consistent with the character of the immediate vicinity of the land proposed for development.

The proposed special event is consistent with the uses of the area.

4. **Design minimizes adverse impact**—the design of the proposed Special Permit Use minimizes adverse effects, including visual impact, of the proposed use on adjacent lands.

No permanent structure shall be constructed pursuant to these permits. As well, none of the requested temporary structures shall be located within public rights of way or public easements.

5. **Duration**—the length of time the proposed Special Permit Use will occur and how impacts will be minimized.

Dates: The effective date is Friday, November 29, 2014(tents). The tournament will be on Saturday, November 30, 2014. Upon the expiration of the special use permit, the applicant will remove all temporary structures.

Time: 8:00a.m.-8:00p.m.

6. **Health and sanitation**—the proposed Special Permit Use complies with all relevant standards related to health and sanitation as determined by the Palm Beach County Public Health Unit.

The applicant will remove all trash and/or debris from the site and the immediate vicinity upon termination of the activity.

7. **Traffic considerations**—the proposed Special Permit Use complies with all relevant transportation standards as determined by the Village of Wellington Engineering Department.

Ingress and egress will not disrupt normal traffic. All necessary parking shall be provided on site. There shall be no parking or stopping on any public right-of-way.

Two(2) off-duty sheriff deputies will provide traffic control.

8. **Consistent with the LDRS**—the proposed Special Permit Use complies with all additional standards imposed on it by all other applicable provisions of the LDRS.

The proposed special event complies with all standards of the ULDC

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9. **Adequate public facilities**—permanent structures shall comply with Article 11, Adequate Public Facilities Standards, of the LDRS.

No permanent structures are proposed by the applicant.

- B. **Describe Special Use/Event Proposed:** The summary shall include the LDRS Section that authorizes the Special Permit Use request, the specific requirement of the code and your proposed request. If live entertainment is proposed as a part of the use/event, provide a description of the type of entertainment and whether amplified sound will or will not be used as a part of the entertainment.

The applicant proposes to hold a public polo match and to erect tents for this special event during the time period covering November 29-December 1, 2014.

- C. State the number of days and dates the use/event is expected to last: 1-day polo tournament
- D. Provide the hours of operation for the entire use/event: 8:00a.m.-8:00p.m.
- E. Is entertainment proposed at the event? Yes What type of entertainment is proposed? polo game
Charity event with DJ
- F. If applicable, state the hours of operation for the entertainment: 12:00 noon until 8:00p.m. on November 30, 2014
- G. Will amplified sound be used? Yes—for announcing the match and music in VIP tent
- H. Provide the number of vendors anticipated for the use/event: 10
- I. Will food be served? Yes Will alcohol be served? Yes....by caterer
- J. Provide the anticipated attendance for the special use/event: 500+/-

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SPECIAL PERMIT USE RENEWAL FORM:

I/We: Southfields Polo LLC, do hereby swear/affirm that I/we are the owners or have consent of all owners to act as agent/representative for Maureen Gross, the petitioner of the property referenced in Special Permit No: _____ issued on _____.

As property owner or agent, I/we certify that the above statements are true and correct and the documents and conditions represented at the time of original approval of the special permit have not been modified and are to be used as the support for this special permit use renewal form. Further, I/we understand that this application, attachments, and fee become part of the official record of the Planning & Zoning Department of Wellington and are non-refundable.

I/We understand that any false information given by me/us will result in the denial, revocation, or administrative withdrawal of the Special Permit Use. I/We understand that any violation of the Special Permit Use may result in code enforcement action up to and including penalties, fines, or liens against the property. I/We further acknowledge that additional information may be required by Wellington in order to process this renewal.

I/We understand the Planning & Zoning Department may impose additional conditions of approval on the renewal of a Special Permit Use that are necessary to accomplish the purpose of the Land Development Regulations, Comprehensive Plan, or other applicable ordinances.

I/We understand that I/We are required to obtain all necessary Wellington permits and occupational licenses prior to commencement of operations.

As agent, I have the consent of all owners of record of the property that is the subject of this request. As agent, I have the authority to agree to conditions that may be imposed.

OWNER INFORMATION:

Southfields Polo LLC/ Melissa Ganzl

Name(s)—Print

13444 Southfields Road

Street Address

Wellington, FL 33414

City, State, Zip Code

(561)373-0303

Telephone including area code

AGENT INFORMATION:

Phelps Media Group/Maureen Gross

Name(s)—Print

12012 South Shore Blvd. #105

Street Address

Wellington, FL 33414

City, State, Zip Code

(561)753-3389—office (561)714-0887 cell

Telephone Number & Fax including area code

000-3-213

OWNER/APPLICANT ACKNOWLEDGEMENT

I/We: Southfields Polo LLC, do hereby swear/affirm that I/we am/are the owner(s)/applicant of the property referenced in this application

I/We certify that the above statements and the statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of Wellington and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by Wellington in order to process this application.

I/We further consent to Wellington to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

Signature(s) of

Owner(s)/Applicant(s)

Melissa Potamkin Ganzi

Print

Name(s) Melissa Potamkin Ganzi, Manager Southfields Polo, LLC

CONSENT STATEMENT

Owner to complete if using agent/representative

I/We, the aforementioned owner(s), do hereby give consent to Maureen Gross to act on my/our behalf to submit this application, all required material and documents, and attend and represent me/us at all meetings and public hearings pertaining to the request(s) and property I/we own described in the attached application. Furthermore, as owner(s) of the subject property, I/we hereby give consent to the party designated above to agree to all terms or conditions that may arise as part of the approval of this application for the proposed use.

Signature(s) of

Owner(s)

Melissa Potamkin Ganzi

Print

Name(s) Melissa Potamkin Ganzi, Manager Southfield Polo, LLC

NOTARY

STATE OF FLORIDA

COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 3 day of October 2013 by Melissa Ganzi. He/She is personally known to me or has produced _____ as identification and ~~did not~~ take an oath.

Margaret Zeller
(Signature of Notary)

My Commission Expires: 11-19-2015

(NOTARY'S SEAL OR STAMP)

(Name - Must be typed, printed, or stamped)

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MARGARET ZELLER
NOTARY PUBLIC-STATE OF FLORIDA
MY COMMISSION EXPIRES NOVEMBER 19, 2015
COMMISSION #EE145516