



Board of Architects Review Application

Phone: 305.460.5238

Email: boardofarchitects@coralgables.com

Application Request

The undersigned Agent/Owner request(s) Board of Architects review of the following application(s):
(Choose one (1) from Section #1 and choose all applicable from Section #2)

1. ☒ New Building OR ☐ Alterations / Additions OR ☐ Color Palette Review
2. ☐ Preliminary Approval
- ☐ Coral Gables Mediterranean Style Design Standards Bonus Approval
- ☐ Final Approval

Property Information

Street Address of the Subject Property: 280 Arvida Parkway

Property/Project Name: Mr. Frank Mata

Legal description: Lot(s) _____

Block(s) _____

Section(s) _____

Folio No. 03-5105-002-0440

Owner(s): Frank Mata

Mailing Address: 280 Arvida Parkway

Telephone: 313 860 9400 Fax _____

Other _____ Email _____ @ _____

Architect(s)/Engineer(s)/Contractor(s): Call Architects Inc

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 1728 Coral Way #702

Telephone: 313 7784329 Business _____ Fax _____

Other _____ Email _____ @ _____

Project Information

Project Description(s): New 2 story SFR Driveway, fence and gate. 13,500 SQFT

Estimated project cost*: 2 Mill
(*Estimated cost shall be +/- 10% of actual cost)

Date(s) of Previous Submittal(s) and Action(s): _____



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Applicant/Owner/Architect/Engineer Affirmation and Consent

(I) (We) acknowledge, affirm, and certify to all of the following:

1. This request, application, application supporting materials and all future supporting materials complies with all provisions and regulations of the Zoning Code, Comprehensive Plan and Code of Ordinances of the City of Coral Gables unless identified and approved as a part of this application request or other previously approved applications. Applicant understands that any violation of these provisions renders the application invalid.
2. That all the information contained in this application and all documentation submitted herewith is true to the best of (my) (our) knowledge and belief.
3. Understand that the application, all attachments and fees become a part of the official records of the City of Coral Gables and are not returnable.
4. All application representatives have registered with and completed lobbyist forms for the City of Coral Gables City Clerk's office.
5. Understand that under Florida Law, all the information submitted as part of the application are public records.
6. Failure to provide the information required for submittal/necessary for review by the Board of Architects may cause the application to be deferred without review.
7. That applications for the Board of Architects review require the presence of the applicant and/or architect/engineer at the Board of Architects meeting unless otherwise notified.
8. That plans submitted to this office are required to be picked up at the Board of Architects counter, by the Applicant, within fourteen (14) days after the Board of Architects meeting unless the plans have received Final Approval by the Board of Architects in which case, they will automatically be processed for a building permit. Plans which are not picked up within fourteen (14) days will be discarded.
9. All fees shall be paid by 12-midnight, three (3) days prior to the meeting date (ie. Monday before a Thursday meeting) to secure placement on the meeting's docket (agenda)
10. I have received consent from the owner of the property to file this application.

NOTE: ONLY ONE SIGNATURE OR AFFIRMATION/CONSENT IS REQUIRED

Agent/Owner Print Name:	Agent/Owner Signature:
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Address:

Telephone:

Fax:

Email:

ARCHITECT'S/ENGINEER'S SEAL	Architect(s)/Engineer(s)/Contractor(s) Print Name:	Architect(s)/Engineer(s)/Contractor(s) Signature:
	Eduardo A. Calil	
	Address: 1728 Coral Way	
	Miami FL 33145	
	Telephone: 318609600	Fax:
Email: eacalil@calilarchitects.com		

STATE OF FLORIDA)
ss
COUNTY OF MIAMI-DADE)

Sworn to or affirmed and subscribed before me this ____ day of ____ in the year 20__ by ____ who has taken an oath and is personally known to me or has produced as identification.

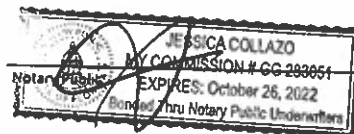
My Commission Expires.

Notary Public

STATE OF FLORIDA)
ss
COUNTY OF MIAMI DADE)

Sworn to or affirmed and subscribed before me this 3 day of Nov in the year 2021 by Eduardo Calil who has taken an oath and is personally known to me or has produced as identification.

My Commission Expires



**Written Statement of Architectural Style for:
Proposed Residence for Frank Mata
280 Arvida Pwy., Coral Gables, Fl. 33156**

The residence is influenced by the Modern Ranch and Tropical Modern styles of architecture. This style of architecture focuses on open floor plans, juxtaposition between vertical and horizontal elements, and blurring the distinctions between indoor and outdoor spaces.

There is an emphasis on the design's rear views toward the waterway. Hence, the crossing axes, which is defined by the unique relationship of the residence and its site. Additionally, a dynamic interrelation between the vertical openings and planes and the pronounced horizontal elements can be found throughout the façade. The wide, uninterrupted roof eaves, ribbon windows, balconies, and terraces ease the building's height, necessitated by flood criteria, by creating strong horizontal elements. The residence has an open floor plan, which unites all the public spaces of the home and creates grand views to the rear yard. Large windows are introduced in the rear façade in order to extend the living spaces into the rear yard. Terraces and balconies connect the main spaces of the home to the outdoors. The use of natural materials; such as dark wood details, and cascading water features illustrate the integration with nature being achieved in the design.