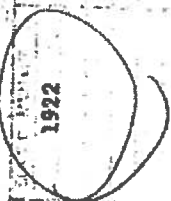


1922

CORAL GABLES GRANADA SEC 13267
LOT 9 BLK 39

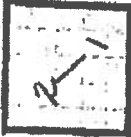
8-113

1177



1922

1221 AVE MILAN

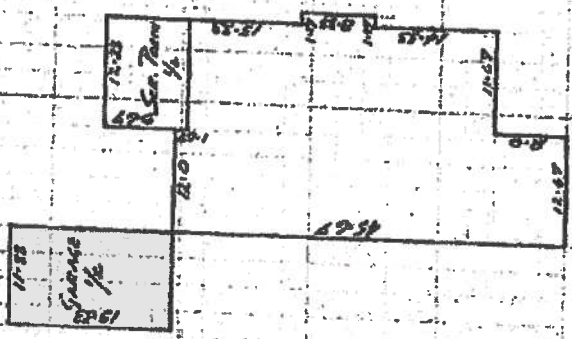


PLAN 10 13 3

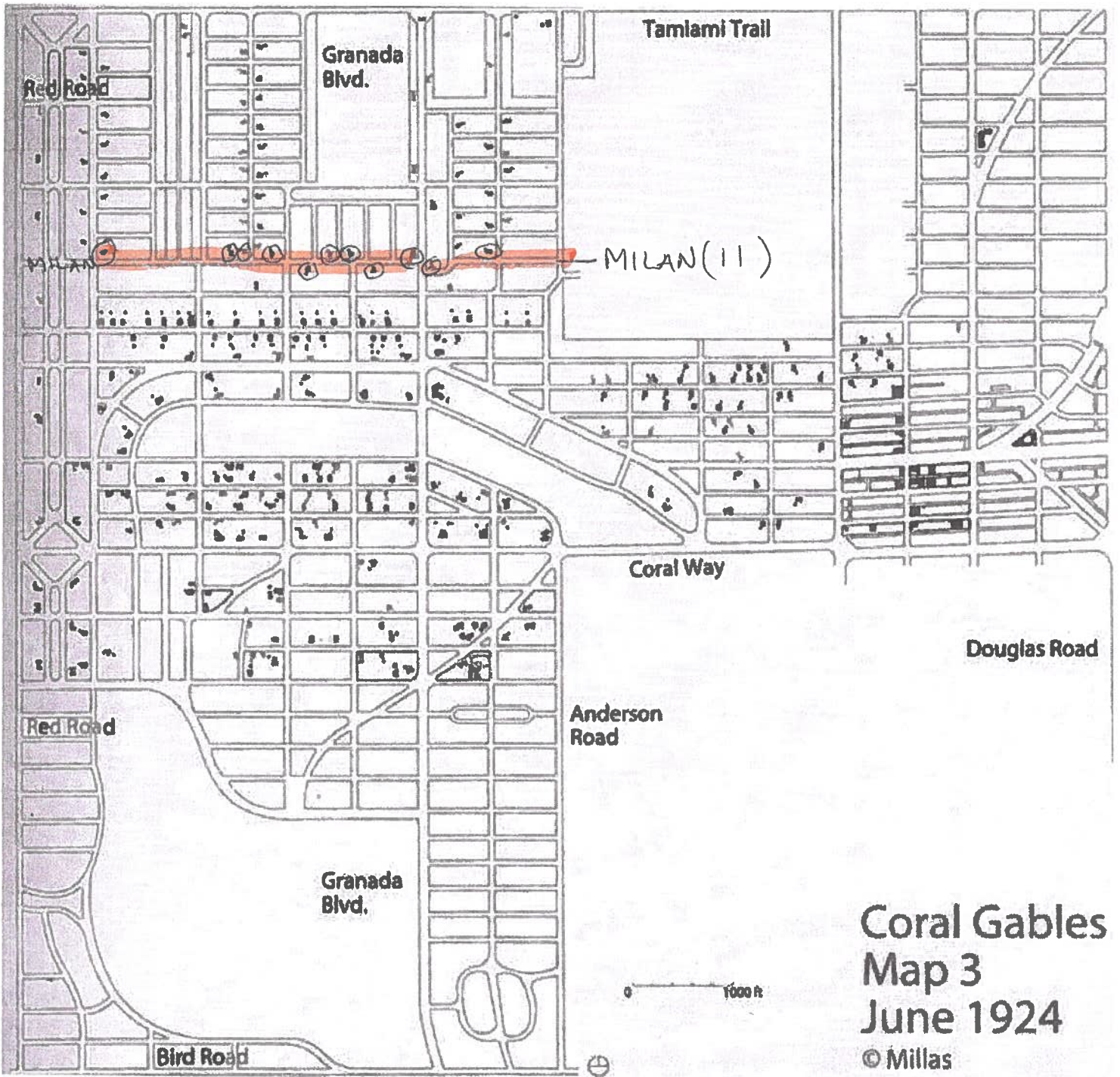
402

- SQUARE FOOTAGE
- ENTRY
- GARAGE
- CAPPORT
- DECK/WAY
- OPEN PORCHES
- SCREEN
- SERVANT QTR.
- POOL
- GARAGE
- OTHER
- SQ. FT.

- POOL
- SC. ENC.
- A. C.
- ELEV.
- SEAWALL



Copies given
to HPB members
@ mtg on
09/21/22
by [signature]

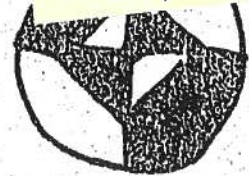
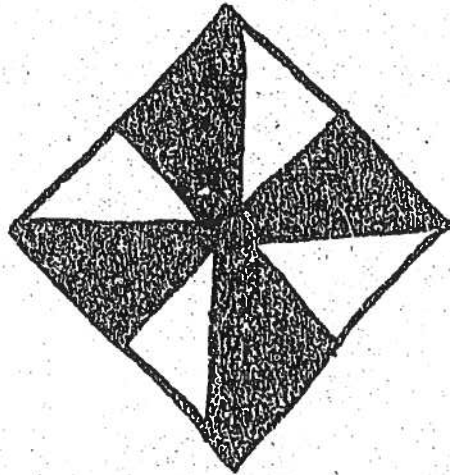
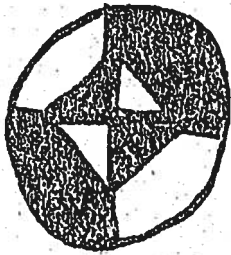


START

BUILDING FILE

STREET ADDRESS

1221 Milan Ave.



One copy
given to HPB
by owner
@ mtg on
09/21/22

NOTICE OF VIOLATION

CITY OF CORAL GABLES

405 Biltmore Way

Date 6/7/82

TO OWNER

1221 MILAN

CORAL GABLES

PREMISES 1221 MILAN

You are hereby notified that an inspection of the above premises discloses that you are in violation of:

Ordinance 1525 (Zoning Code) Section 11.07

South Florida Building Code, Section _____

Code of the City of Coral Gables, Section _____

By INSTALLING WINDOWS WITHOUT A PERMIT

Requirements for Correction: OBTAIN PERMIT

Therefore, you are hereby directed to correct said violation on or before the 14th day of JUNE, 1982, and notify the Code Enforcement Division that the violation has been corrected. Failure to do so will result in charges being filed against you with the Code Enforcement Board of the City of Coral Gables.

By Edward A. Bannister
Code Enforcement Officer

Telephone No. 442-6580

CITY of CORAL GABLES
INTER-OFFICE COMMUNICATION

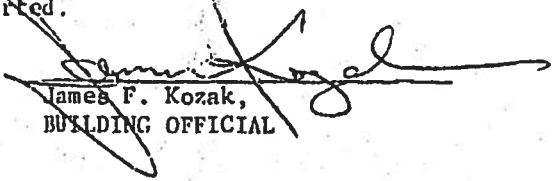
Date January 29, 1982

To Chief Collector - Mr. Gill

From Building & Zoning Dept. - Building Div.

Subject Building Permit No. 27538-B located at 1221 Ave. Milan, Lot 9, Blk. 39, Sec. Gran. 8/113

This is to advise you that Building Permit No. 27538-B, dated December 30, 1981 has been voided. Construction never started.


James F. Kozak,
BUILDING OFFICIAL

JFK:lv

cc: Zoning Adm.
Dade County Tax Assessor

DO NOT USE THIS FORM FOR SCRATCH PAPER

CITY of CORAL GABLES
INTER-OFFICE COMMUNICATION

To Finance Director

Date January 29, 1982

From Building & Zoning Dept. - Building Div.

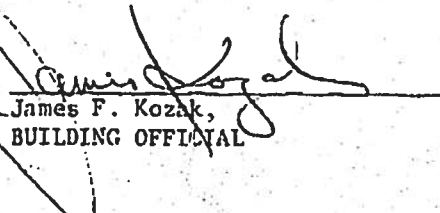
Subject Refund of Building Permit # 27538-B, located at 1221 Ave. Milan Lot 9, Blk. 39, Gran.
8/113

Please refund the following to:

Mr. & Mrs. Eduardo C. Baro Suarez
1221 Ave. Milan
Coral Gables, Fla.

BUILDING PERMIT NO: 27538-B
BOND NO: 21737

\$ 48.00
300.00
\$ 348.00


James F. Kozak,
BUILDING OFFICIAL

JFK:lv

cc: Chief Collector
Zoning Adm

DO NOT USE THIS FORM FOR SCRATCH PAPER.

January 27, 1982

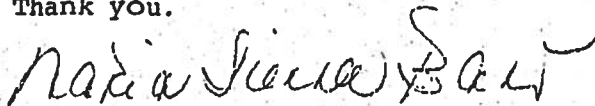
City of Coral Gables
Department of Building & Zoning
Coral Gables, Florida 33134

To whom it may concern:

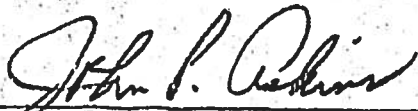
Please be advised that due to financial difficulties
we cannot at this time go through with the remodeling
of our house.

Please accept this letter as cancellation of our permit.

Thank you.



Maria Sierra Baro
1221 Milan Avenue
Coral Gables, Florida 33134



NOTARY PUBLIC

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JUN. 6 1982
BONDED THRU GENERAL INS. UNDERWRITERS

REQUEST FOR MICROFILM

THIS IS TO REQUEST PLANS FOR THE House
HOUSE, APARTMENT, STORES, ETC.

LOCATED AT: 1221 MILAN AVE, LOCAL #1368

I AM:

- OWNER
- BUYER
- ARCHITECT
- CONTRACTOR, BLDG, PLUMBING, ELECTRICAL ETC.
- APPRAISER
- REALTOR
- INTERIOR DECORATOR
- OTHER _____

EXPLANATION AS TO REASON FOR REQUESTING PLANS OTHER THAN OWNER OF PROPERTY:

PLANS NEEDED FOR PORCH ADDITION.

SIGN: [Signature]
FIRM NAME: DRAGON ASSOC. ARCH.

DATE: Sept 28, 1981

PERMIT NO: 402

LEGAL: LOT 9 BLOCK 39 SECTION 14000

APPROVED: _____

OWNERS SIGNATURE: [Signature]

SWORN TO and subscribed before me at Miami, Florida on this, the 23 day of Sept. 19 81.

My commission expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES FEB. 13 1987
BONDED THRU GENERAL INS UNDERWRITERS

[Signature]
NOTARY PUBLIC

CITY OF CORAL GABLES
PLUMBING DIVISION
DEPARTMENT OF BUILDING & ZONING
APPLICATION FOR GAS INSTALLATION

BUILDING PERMIT _____ B A 15244 P
 GAS COMPANY Tropigas PHONE 445-1911
 PLUMBING COMPANY _____ PHONE _____
 FLORIDA STATE LICENSE NO. #876
 WORK EXECUTED BY ER
 OWNER Earl Thomas ADDRESS 1221 Milan
 LOT _____ BLOCK _____ SECTION _____
 RESIDENCE DUPLEX APARTMENT STORE OFFICE
 RESTAURANT _____ FACTORY _____
 SIZES AND TYPE OF STORAGE TANK 400# tank
 TYPE OF GAS _____ L.P. NATURAL
 NEW INSTALLATION: YES _____ NO

AMOUNT	TYPE OF EQUIPMENT	B.T.U. / HOUR
	HOT WATER HEATER	
	SPACE HEATER	
	CENTRAL FURNACE	
	FIREPLACE LOG	
	COOKING RANGE	
	OVEN	
	DEEP FRYER	
	COFFEE URNS	
	STEAM TABLES	
	AIR CONDITIONER	
	REFRIGERATOR	
1.00	OTHERS <u>ChangeGas Co.</u>	

DATE 11-5-65 SIGN: Warren A. Smith

B

Department of Building and Zoning

697 E



DIVISION OF ELECTRICAL INSPECTION
CORAL GABLES, FLORIDA

FINAL CERTIFICATE NUMBER 16880

DATE 7-8-65

July 6 19 65

Application is hereby made for an electrical inspection of the electrical installation in the premises stated below, for which undersigned agrees to correct any infractions of the National Electric Code, and City Ordinance, as pointed out by the City Inspector.

LOCATION

AVOID DELAY BY GIVING FULL AND ACCURATE INFORMATION. ALL SPACES MUST BE FILLED OR APPLICATION WILL BE RETURNED.

LOT NUMBER _____ BLOCK NUMBER _____ SUBDIVISION _____
STREET AND NUMBER 1221 Milan CITY _____
OWNER Earl W. Thomas OCCUPANT None

H. P. OF EACH MOTOR

CEILING	BRACKETS	RECEPTACLES	SWITCHES	TOTAL OUTLETS	NO.	SIZE OF SERVICE		AMP. ERG	FEE COLUMN
						CONDUIT NO.	WIRE NO.		
REMARKS						RANGES			
						OVEN			
						WATER HEATERS			
						SPACE HEATERS			
COMPANY <u>Anchor Elec Co</u> ADDRESS <u>9727 N. Miami</u>						REFRIGERATORS	1		100
MASTER ELECTRICIAN <u>Earl W. Thomas</u> PHONE <u>365-6900</u>						BELLS			
INSPECTION WANTED <u>Ready Final</u>						ATTIC FANS			
SPACE BELOW FOR INSPECTOR						FANS			
RECEIVED BY INSPECTOR						WATER PUMP			
SLAB INSPECTION						DISH WASHER			
ROUGH INSPECTION						DISPOSAL			
FINAL INSPECTION <u>7-7-65</u>						HAIR DRYERS			
						SIGNS			
						AIR COND.			
						SUB-FEED			
						MOTORS			
						TEMPORARY			
						WASHER			
						DRYER	1		2.00
						DEEP FREEZE			
						TELEPHONE			
						TIME CLOCK			
						LIGHT CIRCUITS			
						TOTAL AMPERES			
						PICTURES LAMPS			
<u>HKS</u> INSPECTOR						TOTAL FEE			3.00

DATE 1-8-79

PERMIT NO.

41595

(Re roof only)

ROOFING CONTR.
(or Owner)

Robertson Roofing

JOB ADDRESS

1221 S. Mill St. E. 4001926

TIN CAP

TILE LAY

FLAT

TILE

COMMENTS:

tile # 836-4402

INSPECTOR

Certificate

No 16880

This Certificate must be presented to the FLORIDA POWER AND LIGHT COMPANY when applying for Service.

CITY OF CORAL GABLES

Permit No. 1297 E

Office of Electrical Inspector

Date 7-3-65

CERTIFICATE OF INSPECTION

THIS CERTIFIES that the wiring and apparatus installed

for _____

at, Street and Number 1221 Milburn

Lot _____ Block _____ Section _____

Occupied as _____

has been inspected and current is authorized to be turned on, until otherwise notified, for: Light _____

Heat _____ Power _____ Temporary Service _____

Remarks: Replace the drops

Plumbing _____ ATY Eichen

Building _____ City Electrical Inspector

402

CITY OF CORAL GABLES, FLORIDA

3087711V1

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

Date 8/12/54 1954

OWNER DR. HODSWORTH
ADDRESS 1221 Milan
Lots 9 Block 39 Section Gran.

		SQUARE FOOTAGE	
Number of Stories	_____	Actual	_____
Number of Units	_____	Required	_____
Type of Roof	<u>Flat roof</u>	Detached Buildings	_____
Use of Structure	_____	Land Coverage	_____ %
Is building within easement area?	_____	Actual cu. ft. per front foot (Commercial Buildings)	_____
Is water available for this building?	_____	FEES	
Size of Lot	<u>X</u>	Building	\$ _____
Setback F. _____ R. _____ L. _____ R. _____		Architect	\$ _____
Estimated Cost	<u>\$22,500</u>	Bond No.	\$ _____
Architect	_____	TOTAL	\$ <u>500</u>

MISCELLANEOUS PERMITS:

Plat Deck
Name and Address of Contractor General Sheet Metal Roofing

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to 1943 Miller St. Ft. Lauderdale Phone _____

(Signed) General Sheet Metal Roofing
(Owner or Contractor)
by W. H. ...

STATE OF FLORIDA }
COUNTY OF DADE } SS

Before me, the undersigned authority, this day personally appeared _____ to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lots _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body;

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this _____ day of _____ A.D., 1954

My commission expires:

NOTARY PUBLIC STATE OF FLORIDA

1704 A

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER Earl Thomas Date June 4 1965
ADDRESS P.O. Box 703, Coral Gables, Fla. 1221 Milan Street
Lot(s) _____ Block _____ Section _____

1221 Milan St., Coral Gables, Fla.		SQUARE FOOTAGE
Number of Stories	_____	Actual _____
Number of Units	_____	Required _____
Type of Roof	<u>Gravel roof over</u>	Detached Buildings _____
Use of Structure	_____	Land Coverage _____ %
Is building within easement area?	_____	Actual cu. ft. per front foot (Commercial Buildings) _____
Is water available for this building?	_____	
Size of Lot	<u>X</u>	FEES
Setback F _____ R _____ L _____ R _____		Building \$ _____
Estimated Cost \$ <u>300.00</u>		Architect \$ _____
Architect _____		Bond No. \$ _____
		TOTAL \$ <u>3.00</u>

MISCELLANEOUS PERMITS:
Tin cap one layer of 30# felt, saturated, Two layer of 15# felt, saturated with hot asphalt mopped, Flood roof with hot asphalt and embed a layer of gravel.

Name and Address of Contractor Murray Roofing, Inc., 9775 S. W. 120 St., Miami, Fla.

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to _____ Phone 235-1351

(Signed) Murray Roofing, Inc.
(Owner or Contractor)
by Vance Murray

STATE OF FLORIDA }
COUNTY OF DADE } SS

Before me, the undersigned authority, this day personally appeared _____ to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lot(s) _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this _____ day of _____ A.D. 19 _____

My commission expires:

14863A

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER Gary A. Lazarus Date May 12 1970
ADDRESS 1221 Milan
Lot(s) _____ Block _____ Section _____

Number of Stories	<u>1</u>	Actual	_____
Number of Units	_____	Required	_____
Type of Roof	_____	Detached Buildings	_____
Use of Structure	<u>Residence</u>	Land Coverage	_____ %
Is building within easement area?	_____	Actual cu. ft. per front foot (Commercial Buildings)	_____
Is water available for this building?	_____		
Size of Lot	<u>X</u>		
Setback F _____ R _____ L _____ R _____		Building	\$ _____
Estimated Cost	<u>\$ 380.00</u>	Architect	\$ _____
Architect	_____	Bond No.	\$ _____
		TOTAL	\$ <u>5.00</u>

MISCELLANEOUS PERMITS:
Replace 9 wood windows with aluminum windows - (SAVE OPENINGS)

Name and Address of Contractor Yale Ogron Mfg. Co. Inc. 671 W. 18th Street, Mia.
I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to this building and its construction may be sent to Yale Ogron Mfg. Co. Inc. Phone 8878267
(Signed) J. O. Ogron (Owner of Contractor)

STATE OF FLORIDA }
COUNTY OF DADE } SS

Before me, the undersigned authority, this day personally appeared _____ to me well known, who being by me first duly sworn, did depose and say as follows:
1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lot(s) _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this _____ day of _____ A.D., 19 _____

My commission expires:

41545

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER NANCY LAZARUS (VETTERICK) Date JAN 8 1979
ADDRESS 1221 MILAN AVE.
Lot(s) Block Section

Table with columns for building specifications (Number of Stories, Number of Units, Type of Roof, etc.) and fees (Building, Architect, Bond, etc.). Includes a 'SQUARE FOOTAGE' section with 'Actual' and 'Required' values.

MISCELLANEOUS PERMITS: REMOVE EXISTING ROOF (FLAT ADDP AROUND PARAPETS ONLY)
REPLACE ROTTEN LUMBER, TIN CAP ONE 30 LB. ROLL. FULL MAP 2-15 1/2 FEET
ROAD w/ HOT ASPHALT & EARED PER ROW, COVER PARAPET WALLS w/ 90 LB. SLATE

Name and Address of Contractor: PALMETTO ROOFING INC. 3294 NW 69 ST. MIAMI

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to MORRIS GALICIA Phone 836-4407

Handwritten signature of the contractor.

(Signed) [Signature] (Owner or Contractor) R 20019266
by State of Florida File No.

STATE OF FLORIDA } SS
COUNTY OF DADE }

Before me, the undersigned authority, this day personally appeared to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lot(s) Block Section
Street

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workmen's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

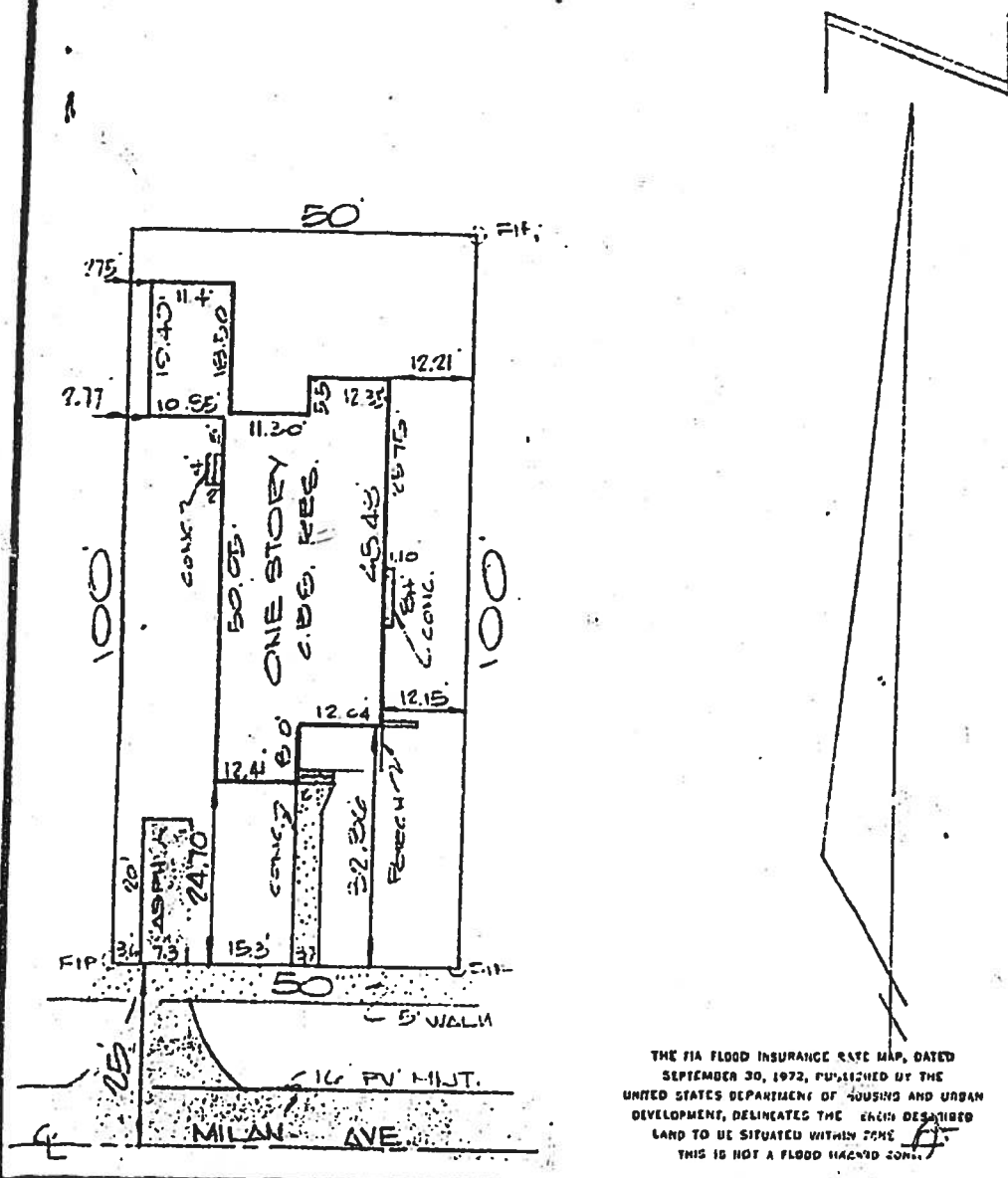
Sworn to and subscribed before me this day of A.D., 19

My commission expires:

This property described as:
 Lot 9, Block 39,
 REVISED PLAT CORAL GABLES GRANADA
 SECTION,
 according to the Plat
 thereof, as recorded in
 Plat Book 8, Page 113
 of the Public Records of
 Dade County, Florida.

12	39
11	38
10	37
9	36
8	35
7	34
6	33
5	32
4	31
3	30
2	29
1	28

LOCATION SKETCH



THE FIA FLOOD INSURANCE RATE MAP, DATED
 SEPTEMBER 30, 1972, PUBLISHED BY THE
 UNITED STATES DEPARTMENT OF HOUSING AND URBAN
 DEVELOPMENT, DELINEATES THE LAND DESCRIBED
 LAND TO BE SITUATED WITHIN ZONE
 THIS IS NOT A FLOOD HAZARD ZONE.

PROPERTY OF Baro, 1221 Milan Avenue, Coral Gables, Florida. 33134

I hereby certify that the attached sketch represents a recent survey made under my direction, and is true and correct to the best of my knowledge and belief, and that there are no encroachments on said land other than are shown hereon.
William V. Lannes
 Fla. Reg. Surveyor No. 2243
 Fla. Reg. Engineer No. 16774

LANNES and GARCIA, INC.
 ENGINEERS - LAND SURVEYORS - LAND PLANNERS
 P. O. Box 581131
 Miami, Florida, 33165

DATE	SCALE	DRAWN BY	DRWG. NO.
10-20-76	1" = 20'	J. G.	175-5581

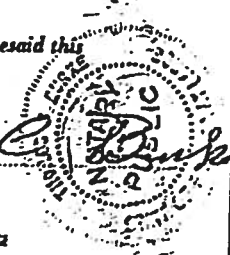
OFF
REC 1239 1959

State of FLORIDA
County of DADE

I Heredy Certify, That on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared
EDUARDO CELESTINO BARO and MARIA SIERRA BARO
to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

Witness my hand and official seal in the County and State last aforesaid this
day of 21 - September A. D. 1959

Thomas O. ...
Notary Public.
My commission expires
NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES FEB. 13 1967
BONDED THROUGH GENERAL INS. UNDERWRITERS



RECORDED IN OFFICIAL RECORDS BOOK
OF DASH COUNTY, FLORIDA.
RECORD VERIFIED
RICHARD P. BUNKER,
CLERK CIRCUIT COURT

Date
Abstract of Description

To

Warrantably Deed
MANCO FORM 2

OFF REC 112397 1958

PM OCT 13 1958

81R265S93

DEED WARRANTY
STATE, FLORIDA

HAMCO FORM 1

This Indenture,

Made this 21st day of September, A. D. 1951

Between EDUARDO CELESTINO BARO SUAREZ, joined by his wife, MARIA SIERRA BARO,
of the County of Dade, in the State of Florida
parties of the first part, and EDUARDO CELESTINO BARO SUAREZ, and MARIA SIERRA BARO, his wife

of the County of Dade, in the State of Florida
parties of the second part, whose post office address is 1221 Milan Avenue, Coral Gables, Florida 33134

Witnesseth: That the said parties of the first part, for and in consideration of the sum of TEN (\$10.00) DOLLARS, & other good and valuable consideration to them in hand paid by the said parties of the second part, the receipt whereof is hereby acknowledged, they granted, bargained and sold to the said parties of the second part, their heirs and assigns forever, the following described land, situate, lying and being in the County of Dade, State of Florida to-wit:

Lot 9, Block 39, REVISED PLAT OF Coral Gables, GRANADA SECTION, as recorded in Plat Book 8, Page 113, of the Public Records of Dade County, Florida.

SUBJECT TO: The 1951 Taxes and taxes for subsequent years;

Conditions, restrictions and limitations filed of record, if any.

The purpose of this Deed is to vest the title to said property in EDUARDO CELESTINO BARO SUAREZ, and MARIA SIERRA BARO, as an estate by the entireties.

0.45 Documentary Stamp Collected
E. C. Gilb
Dade County
Recorder
Clerk, Circuit & County Courts
By C. Gilb 13th Fl.

And the said parties of the first part do hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

In Witness Whereof, The said parties of the first part have hereunto set their hands and seals the day and year first above written.
Signed, sealed and delivered in presence of us

Elena M. Lozada

Priscilla Alvarez

Eduardo Celestino Baro Suarez
EDUARDO CELESTINO BARO SUAREZ,
Maria Sierra Baro
MARIA SIERRA BARO

This instrument prepared by: GEORGE E. GELB, ESQUIRE,
Address 19 W. Flagler Street, Suite 1116,
Miami, Florida 33130



7

27539-3

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, applicable to the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER: M/M EDUARDO SCHASTINGO GARCIA SUAREZ
ADDRESS: 1221 AVE. MIHAN
Lot(s): 1, Block: 39, Section: 6229A 2

Table with columns for building details and costs. Includes rows for Number of Stories, Type of Roof, Use of Structure, Estimated Cost, and a cost breakdown table for Building, Architect, and TOTAL.

MISCELLANEOUS PERMITS:

Owner Builder Permit DOES NOT COVER:

Name and Address of Contractor: [Redacted]
I hereby submit, in duplicate, all the plans and specifications for said building...
(Owner's Signature)

STATE OF FLORIDA }
COUNTY OF DADE } SS

Before me, the undersigned authority, this day personally appeared to me well known, who being by me first duly sworn, did depose and say as follows:
1. That he is making application for a construction permit for the construction, or repair, of a building in the City of Coral Gables on the following described premises:

Lot(s): _____ Block _____ Section _____
Street: _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workmen's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this 30 day of December A.D. 1981

My commission expires:

Table for DISTRICTS: H.F.H., G.F.H., OWNER. Includes checkboxes for Required and Proposed, and a note about inappropriate districts.

Notary Public State of Florida
Signature: [Redacted]
Date: 12/21/81

DEED WARRANTY STATUTORY

MANCO FORM 8

This Indenture,

Made this 21st day of September, A. D. 1981.

Between EDUARDO CELESTINO BARO SUAREZ, joined by his wife, MARIA SIERRA BARO, of the County of Dade, in the State of Florida parties of the first part, and EDUARDO CELESTINO BARO SUAREZ, and MARIA SIERRA BARO, his wife of the County of Dade, in the State of Florida parties of the second part, whose post office address is 1221 Milan Avenue, Coral Gables, Florida 33134.

Witnesseth: That the said parties of the first part, for and in consideration of the sum of TEN (\$10.00) DOLLARS, & other good and valuable consideration to them in hand paid by the said parties of the second part, the receipt whereof is hereby acknowledged, they granted, bargained and sold to the said parties of the second part, their heirs and assigns forever, the following described land, situate, lying and being in the County of Dade, State of Florida to-wit:

Lot 9, Block 39, REVISED PLAT OF Coral Gables, GRANADA SECTION, as recorded in Plat Book 8, Page 113, of the Public Records of Dade County, Florida.

SUBJECT TO: The 1981 Taxes and taxes for subsequent years;

" Conditions, restrictions and limitations filed of record, if any.

The purpose of this Deed is to vest the title to said property in EDUARDO CELESTINO BARO SUAREZ, and MARIA SIERRA BARO, as an estate by the entireties.

0.45 Documentary Stamp Collected
Eduardo P. Brinkley
Clark, Circuit & County Courts
By: *[Signature]* 13 Oct 81

And the said parties of the first part do hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

In Witness Whereof, The said parties of the first part have hereunto set their hands and seals the day and year first above written.
Signed, sealed and delivered in presence of us

[Signature] }
[Signature] }
EDUARDO CELESTINO BARO SUAREZ,
MARIA SIERRA BARO

This instrument prepared by: GEORGE E. GELB, ESQUIRE,
Address 19 W. Flagler Street, Suite 1116,
Miami, Florida 33130

7

402 B

A-50528

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER E. ILVSO C. BIRD Date 6-17-1982
ADDRESS 1221 YLOR LANE
Lots 9 Block 39 Section GR 4001

Table with columns for building details (Number of Stories, Type of Roof, etc.) and SQUARE FOOTAGE (Actual, Required, etc.). Includes a FEES section with Building \$40.00 D.F., Architect \$, and TOTAL \$40.00.

MISCELLANEOUS PERMITS: From THOUSIES to WINDOW TYPE - Awning (5) - NO Structural Changes.

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to... Approval and Issuance of Permit by STATE OF FLORIDA COUNTY OF DADE

Before me, the undersigned authority, this day personally appeared to me well known, who being by me first duly sworn, did depose and say as follows: 1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make return thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this day of A.D., 19

My commission expires:

Table with columns for DISTRICTS (H. F. H., G. F. H., OTHER) and rows for Required and Proposed. Includes a note: x-out inappropriate districts

NOTARY PUBLIC STATE OF FLORIDA

B
APPLICATION FOR BUILDING PERMIT

A 61325

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not, and that all insurance required by Law and local regulation shall be carried and kept in force for the entire period that the work under this permit is underway and until its satisfactory completion as determined by issuance of a final completion certification by the City.

OWNER Michael P. Martin Date 1-22-86 19 86

ADDRESS 1221 MILAN AVE

Lot(s) _____ Block _____ Section _____

Number of Stories	_____	Actual	<u>9</u>
Number of Units	_____	Required	_____
Type of Roof	<u>Fiberglass</u>	Detached Buildings	_____
Use of Structure	_____	Land Coverage	_____ %
Is building within easement area?	_____	Actual cu. ft. per front foot (Commercial Buildings)	_____
Is water available for this building?	_____	FEES	
Size of Lot	_____ X _____	Building	\$ <u>52.00</u>
Setback F _____ R _____ L _____ R _____		Architect	\$ <u>274.33</u>
Estimated Cost	<u>\$6000</u>	Bond No.	<u>300.00</u>
Architect	_____	TOTAL	<u>\$352.00</u>

MISCELLANEOUS PERMITS: We will cover 9 sq of flat roof with 1 layer of 30 lb felt fastened with tin caps. On top of this 2 layers of fiberglass roof paper will be provided which will be fastened with hot asphalt. On top of this 1 layer of 90 lb felt will be provided and fastened with hot asphalt.

Name and Address of Contractor Rodriguez Roofing 2751 Village Green Dr.

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to _____ Phone 552-6682

1-23-86
CM

(Signed) Jorge Molina
(Owner or Contractor)

bv _____
State of Florida File No. _____

STATE OF FLORIDA } SS
COUNTY OF DADE }

Before me, the undersigned authority, this day personally appeared (Print) _____ to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lot(s) _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workmen's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables. The owner-builder may be required to furnish a cash bond sufficient to cover the cost of repair or replacement of consequential damage of City property.

(Signature) _____

Sworn to and subscribed before me this _____ day of _____ A.D., 19 _____

My commission expires:

LOWEST FINISHED FLOOR ELEVATION (including basement)			
DISTRICTS			
	H. F. H.	G. F. H.	OTHER
Required			
Proposed			
x-out inappropriate districts			

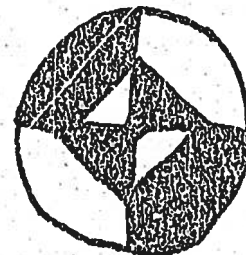
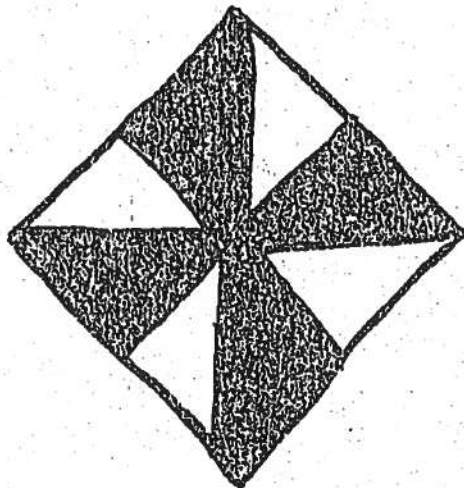
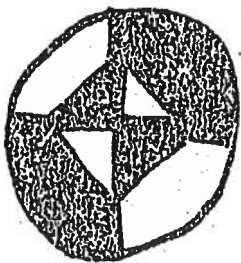
NOTARY PUBLIC STATE OF FLORIDA

START

BUILDING FILE

STREET ADDRESS

1221 Milan Ave.



A67080

APPLICATION FOR BUILDING PERMIT

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Building Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not.

OWNER MIKE MARTIN Date 8-27 1987
ADDRESS 12-21 MILAN AVE
Lot(s) 9 Block 39 Section GRANADA SECT
REV.

Number of Stories	_____	Actual	SQUARE FOOTAGE
Number of Units	_____	Required	<u>240</u>
Type of Roof	_____	Detached Buildings	_____
Use of Structure	_____	Land Coverage	_____ %
Is building within easement area?	_____	Actual cu. ft. per front foot (Commercial Buildings)	_____
Is water available for this building?	_____		
Size of Lot	<u>X</u>		
Setback F _____ R _____ L _____ R _____		Building	FEES
Estimated Cost <u>571.00</u>		Architect	<u>15.00</u>
Architect _____		Bond No. _____	<u>5.00</u>
		TOTAL	<u>10.00</u>

MISCELLANEOUS PERMITS: RECOVER TWO AWNINGS, DUSKY BLUE COLOR
PATIO 518

Name and Address of Contractor AA Awning color
THOMAS AWNINGS

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to 3470 NW 7 ST. Phone 6494511

(Signed) Thomas P. Long
by _____ (Owner or Contractor)
8-31-87
CR

STATE OF FLORIDA } SS
COUNTY OF DADE }

Before me, the undersigned authority, this day personally appeared _____ to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lot(s) _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables.

Sworn to and subscribed before me this 27 day of August A.D. 1987

My commission expires: 12/7/88

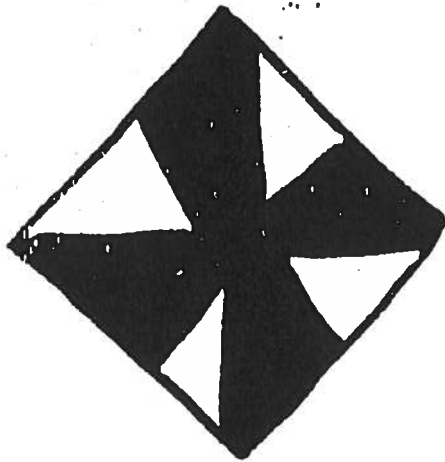
John Liffard
NOTARY PUBLIC STATE OF FLORIDA

START

BUILDING FILE

STREET ADDRESS

1221 Milan Ave.





STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION AND INSTALLATION PERMIT

Authority: Chapter 381, FS
 Chapter 10D-6, FAC

Applicant Katherine Phillips
1221 Milan

Permit Number 89-0362

PART I - SYSTEM CONSTRUCTION SPECIFICATIONS AND CONSTRUCTION APPROVAL

Treatment Tank		Minimum Drains trench Size	OR	Minimum Absorption Bed Size
Septic tank or aerobic unit <u>900</u> gallons	Grease Interceptor _____ gallons	_____ Square Feet		<u>281</u> Square Feet
Septic tank or aerobic unit _____ gallons	Dosing tank _____ gallons	_____ Square Feet		_____ Square Feet
Graywater tank _____ gallons		_____ Square Feet		_____ Square Feet
Laundry waste tank _____ gallons		_____ Square Feet		_____ Square Feet

Other Requirements: Relocation (20)

- (a) Installation must be in accord with requirements of chapter 10D-6, F.A.C.
- (b) A system construction permit is valid for a period of one calendar year from date of issue.
- (c) Final installation inspection and approval is required before the system is covered.

(d) Invert of stub-out for Drainfield to be ER benchmark.
 Invert of stub-out for _____ to be _____ benchmark.
 Invert of stub-out for _____ to be _____ benchmark.
 Invert of stub-out for _____ to be _____ benchmark.

(e) Fill quality and quantity: Install 42" of sand under the bottom of Drainfield

I agree to install 42" of sand under the bottom of Drainfield

(f) Other: H.R.D. permit No. 89-362 good only for relocation not for building permit

System design and specifications by: [Signature] Title Engt
 Construction authorized by: [Signature] Date 2-1-89
[Signature] County Public Health Unit

Note: Completed copies of this form will be provided to the applicant, installer and the building department.

AUDIT CONTROL NO. 01843



**STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION AND INSTALLATION PERMIT**

Applicant K. Phillips
1221 NW 4th Ave

Permit Number 89-0362

PART II - SYSTEM INSTALLATION INSPECTION AND FINAL INSTALLATION APPROVAL

Installer P & R Smith

Tank Manufacturer Prot. Drain

Proper tank legend: Yes No

Tank material Conc. Tank level: Yes No

Tanks watertight: Yes No

Tank size: 900 gallons gallons gallons

Proper tank outlet devices: Yes No

Manhole or marker to grade: Yes No

Drainfield Trench

Absorption Bed

Length	Width	Length	Width
___ feet	___ feet	___ feet	___ feet
___ feet	___ feet	___ feet	___ feet
___ feet	___ feet	___ feet	___ feet

Length 14.5 feet x 18 feet = 261 ft²

Length 281 feet x ___ feet = ___ ft²

Proper No. drainlines: Yes No 5

Proper pipe separation: Yes No 34

Total = ___ ft²

Total = ___ ft²

Distribution box level: Yes N/A

Systems located as permitted: Yes No

Systems including plumbing stub-outs installed at proper elevation: Yes No

Average depth to drainpipe invert from finished grade: ___ inches Maximum depth: 24 inches

Average depth of drainfield gravel: 15 inches Minimum depth of gravel: 12 inches

Proper gravel size: Yes No Gravel is suitable quality: Yes No

Backfill or fill material as required: (Quality) Yes No (Quantity) Yes No

Other findings: Sound 47" relocation

Inspected by: R. L. Roeth

Date 2-3-89

PART III - FINAL INSTALLATION APPROVAL

Date 2-3-89 Approved by: R. L. Roeth

Dade
COUNTY PUBLIC HEALTH UNIT

AN APPROVED INSTALLATION DOES NOT GUARANTEE PERFORMANCE

Note: Completed copies of this form will be provided to the applicant, installer and the building department.

**CITY OF CORAL GABLES
BUILDING DEPARTMENT
405 BILTMORE WAY
CORAL GABLES, FLORIDA 33134**

J. R. A. No 89-0362

PLUMBING PERMIT APPLICATION

BUILDING PERMIT NO.			PLUMBING PERMIT NO. 13013
TYPE	NUMBER RGH SET	FEE	Contractor P. R. Smith C. Phone
BATH TUB			Contractor's Address
BIDET			1712 SW 27th
DISHWASHER			Owner's Name KATHERINE PHILIPS Phone
DISPOSAL			Job Address
DRINKING FOUNTAIN			1221 MILAN
FLOOR DRAIN			Lot Block Subdivision
GREASE TRAP			Present or Proposed Use of Building
INTERCEPTOR			Old New No. of Bedrooms
LAVATORY			Application is hereby made to obtain a permit to do the work and installations as hereon indicated. I certify that no work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in Dade County and the City of Coral Gables.
LAUNDRY TRAY			
CLOTHES WASHER			Signature of Master Plumber or Owner
SHOWER			Contr. Cert. No. 110209
SINK			Contr. Social Security No. 1265376084
TEMPORARY WATER CLOSET			Insurance Date 3/14/89 Date of Issuance: 2/1/89
URINAL			This permit does not become valid until signed by an authorized representative of the Director, Coral Gables Building Department and all fees are paid and receipt acknowledged in the space provided.
WATER CLOSET			
INDIRECT WASTES			PLUMBING INSPECTIONS
ICE MAKER			GROUND
WATER SUPPLY TO:			ROUGH
AIR CONDITIONING UNIT			TUB & WATER PIPE
FIRE SPRINKLER			SEWER
HEATER - NEW INSTALLATION			SEPTIC TANK
HEATER - REPLACE			WELL
LAWN SPRINKLER - WELL			POOL PIPING
SWIMMING POOL - WELL			FINAL PLUMBING 2/3/89 FF
WATER SERVICE			
SEWER CONNECTIONS			THE OWNER'S AFFIDAVIT:
SEPTIC TANK CONNECTIONS			I further certify that all work will be done by me personally, for myself, without any outside help, other than a licensed & duly qualified contractor as required by law.
SEWER CAP			Signed _____
SEPTIC TANK 900 Gall Septic Tank 25' x 35'			
RELAY			
PUMP & ABANDON SEPTIC TANK			
SOAKAGE PIT - CU. FT.			
CATCH BASIN			
INTERCEPTOR, GREASE, OIL			
DISCHARGE WELL			
DOMESTIC WELL			
AREA DRAIN			
ROOF INLET			
SOLAR WATER HEATER			
SOLAR WATER HEATER REPAIRS			
POOL PIPING			
LAWN SPRINKLER SYSTEM			
REINSPECTION			
CAP FIXTURE			
TOTAL FEE \$35.00			

B
APPLICATION FOR BUILDING PERMIT

A 72244

Application is hereby made for the approval of the detailed statement of the plans and specifications herewith submitted for the building or other structure herein described. This application is made in compliance and conformity with the Ordinance, Ordinance of the City of Coral Gables, Florida. All provisions of the Laws of the State of Florida, all ordinances of the City of Coral Gables, and all rules and regulations of the Building Department of the City of Coral Gables shall be complied with, whether herein specified or not, and that all insurance required by Law and local regulation shall be carried and kept in force for the entire period that the work under this permit is underway and until its satisfactory completion as determined by issuance of a final completion certificate by the City.

OWNER PHILIPS Date 12/20 1958
ADDRESS 1221 MILAN
Lots) _____ Block _____ Section _____

		SQUARE FOOTAGE
Number of Stories	<u>1</u>	Actual <u>250 SQ FT</u>
Number of Units	<u>1</u>	Required _____
Type of Roof	<u>TILE FLAT</u>	Detached Buildings _____
Use of Structure	_____	Land Coverage _____%
Is building within easement area?	_____	Actual cu. ft. per front foot _____
Is water available for this building?	_____	(Commercial Buildings) _____
Size of Lot	<u>X</u>	FEES
Setback F _____ R _____ L _____ R _____		Building \$ <u>35.00</u>
Estimated Cost <u>\$ 645.00</u>		Architect \$ _____
Architect _____		Bond No. \$ _____
		TOTAL \$ 35.00

MISCELLANEOUS PERMITS: RE-ROOF FLAT WHITE TILE WITH NEW GORY TO MATCH PER S.F.B.C. ROOF FLAT REAR SECTION PER S.F.B.C.

Name and Address of Contractor THOMAS COOK 12551 SW 119 ST.

I hereby submit, in duplicate, all the plans and specifications for said building. All notices with reference to the building and its construction may be sent to THOMAS COOK Phone 255-0713

(Signed) [Signature] (Owner or Contractor)

*NEW
the ok.*

12-20-58
CR

by _____ State of Florida File No. _____

STATE OF FLORIDA } SS
COUNTY OF DADE }

Before me, the undersigned authority, this day personally appeared (Print) _____ to me well known, who being by me first duly sworn, did depose and say as follows:

1. That he is making application for a construction permit for the construction, or repair, of a building in The City of Coral Gables on the following described premises:

Lots) _____ Block _____ Section _____
Street _____

2. That in connection with the work to be done under such permit no general contractor has been employed or retained, and no person, firm or corporation, acting as a contractor, is receiving any compensation whatever in connection with the work to be done under said permit, except:

To be furnished at or before completion of job. (It is understood and agreed that NO CERTIFICATE of occupancy will be issued until a complete list of all Contractors who worked on the job has been furnished to the City and unless all such Contractors had current occupational licenses in Coral Gables.)

that otherwise each person engaged in said construction work is being paid on the basis of a stipulated sum for his services per day, by the affiant, and that the labor being used in such construction is being done by what is commonly known as "day labor;" that affiant, as owner, will comply with the Workman's Compensation law of the State of Florida, by obtaining a statutory Workmen's Compensation Insurance policy or by qualifying with the Florida Industrial Commission as a self-insurer; that the affiant will withhold Social Security Taxes, and Federal and State Unemployment Insurance Taxes, and Federal Income Taxes from wages of all such employees working for him on such construction and will make returns thereof to the Collector of Internal Revenue, and to any proper State body.

3. That this affidavit is being made by this affiant for the purpose of inducing the City to grant a construction permit and to avoid the payment of the license fee and the deposit of a contractor's bond, as would be required if this affiant were engaged in the business of erecting or repairing buildings in The City of Coral Gables. The owner-builder may be required to furnish a cash bond sufficient to cover the cost of repair or replacement of consequential damage of City property.

(Signature)

Sworn to and subscribed before me this _____ day of _____ A.D., 19 _____

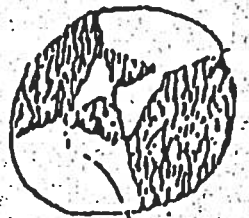
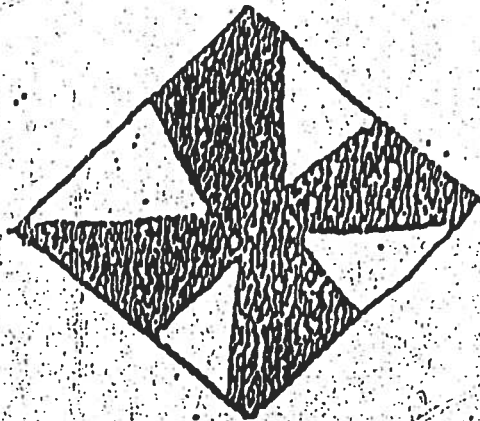
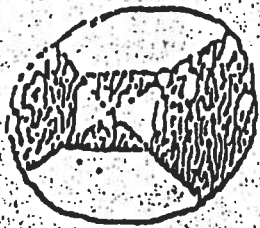
My commission expires:

LOWEST FINISHED FLOOR ELEVATION (including basement)			
DISTRICTS			
Required	H. F. H.	G. F. H.	OTHER
Proposed			
x-Gut inappropriate districts			

NOTARY PUBLIC STATE OF FLORIDA

START
BUILDING FILE
STREET ADDRESS

1221 MILAN AVENUE



CITY OF CORAL GABLES
 Building Department
 405 Biltmore Way
 Coral Gables, Florida 33134
ELECTRICAL PERMIT APPLICATION

24434

JOB DATA				
TYPE	NUMBER	FEE		
OUTLETS, ROUGH WIRING				
SERVICE CAPACITY				
RANGE RANGE TOP	<i>1</i>			
DRYER				
AIR CONDITIONER (CENTRAL)				
MOTORS LIST BELOW				
WATER HEATERS				
CLOTHES WASHER				
DISHWASHER				
PERMANENT FANS				
STRIP HEATER (KW)				
DISPOSAL				
NUMBER OF LAMPS				
TEMPORARY SERVICE				
REFRIGERATOR				
SUBFEEDS				
TRASH COMPACTOR				
T.V.				
INTER-COM				
FIRE ALARM				
BURGLAR ALARM				
REPAIR ()				
SPECIAL PURPOSE OUTLETS				
TEMP. FOR TEST				
SIGN (TYPE)				
SWIMMING POOL				
<i>CODE VIOLATIONS</i>				
TOTAL FEE		<i>35.00</i>		
LIST: MOTORS, GENERATORS AND TRANSFORMERS				
NO.	FEE	NO.	A.C. TCN	FEE

ELECTRICAL PERMIT NO. 24434	BUILDING PERMIT NO.
Contractor E-Z ELECTRICAL CONT.	Phone 221-3105
Contractor's Address 12525 SW. 22 TER.	
Owner's Name MR. Philip	Phone
Job Address 1221 MILAN	
Lot	Block Subdivision
PROPOSED USE OF BUILDING	
NO. OF STORES	FAMILIES METERS
OFFICES	BEDROOMS
BUILDING INFORMATION:	
TYPE OF WORK	ADD <input type="checkbox"/> NEW <input type="checkbox"/> OLD <input type="checkbox"/> NEW <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/>
Application is hereby made to obtain a permit to do the work and installations as hereon indicated. I certify that no such work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of laws regulating construction in Dade County and the City of Coral Gables. I further certify that I have checked and am responsible for the adequacy of any existing wiring systems to which the work described in this permit adds extension or makes changes.	
Master Electrician or Home Owner <i>[Signature]</i>	
Contr. Cert. No.	14842
Contr. Social Security No.	568-90-3936
Insurance Date:	Date of Issuance: Issued By:
This permit does not become valid until signed by an authorized representative of the Director, Coral Gables Building Department and all fees are paid and receipt acknowledged in the space provided.	
ELECTRICAL INSPECTIONS	
TEMPORARY	
SLAB	
ROUGH	
OTHER	
REMARKS:	
FINAL ELECTRICAL	<i>2(B)</i>
THE OWNER'S AFFIDAVIT	
I further certify that all work will be done by me personally, for myself, without any outside help, other than a licensed and duly qualified contractor as required by law.	
Signed	

CITY OF CORAL GABLES
 Building Department
 405 Biltmore Way
 Coral Gables, Florida 33134
ELECTRICAL PERMIT APPLICATION

JOB DATA

TYPE	NUMBER	FEE
OUTLETS, ROUGH WIRING		
SERVICE CAPACITY		
RANGE RANGE TOP	1	
DRYER		
AIR CONDITIONER (CENTRAL) 3 1/2 TON	1	
MOTORS LIST BELOW		
WATER HEATERS		
CLOTHES WASHER		
DISHWASHER		
PERMANENT FANS		
STRIP HEATER (KW)		
DISPOSAL		
NUMBER OF LAMPS		
TEMPORARY SERVICE		
REFRIGERATOR		
SUBFEEDS		
TRASH COMPACTOR		
T.V.		
INTER-COM		
FIRE ALARM		
BURGLAR ALARM		
REPAIR		
SPECIAL PURPOSE OUTLETS		
TEMP. FOR TEST		
SGN (TYPE)		
SWIMMING POOL		
TOTAL FEE		35.00

LIST: MOTORS, GENERATORS AND TRANSFORMERS

ID	FEE	NO.	A.C. TON	FEE

ELECTRICAL PERMIT NO. 24399 **BUILDING PERMIT NO.**

Contractor **E-2 Electrical cont.** Phone

Contractor's Address **12525 S.W. 32 TER.**

Owner's Name **MR. PHILIPS** Phone

Job Address **1221 MILAN**

Lot Block Subdivision

PROPOSED USE OF BUILDING RES.

NO. OF STORES _____ **FAMILIES** _____ **METERS** _____

OFFICES _____ **BEDROOMS** _____

BUILDING INFORMATION:

TYPE OF WORK ADD NEW ALTER REPAIR

OLD NEW

Application is hereby made to obtain a permit to do the work and installations as hereon indicated. I certify that no such work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of laws regulating construction in Dade County and the City of Coral Gables. I further certify that I have checked and am responsible for the adequacy of any existing wiring systems to which the work described in this permit adds extension or makes changes.

[Signature]
 Master Electrician or Home Owner

Contr. Cert. No. **14892**

Contr. Social Security No. **568-90-3936**

Date of Issuance: _____
 Issued By: _____

This permit does not become valid until signed by an authorized representative of the Director, Coral Gables Building Department and all fees are paid and receipt acknowledged in the space provided.

ELECTRICAL INSPECTIONS

TEMPORARY _____

SLAB _____

ROUGH _____

OTHER _____

REMARKS:

2/6/89 *[Signature]*

FINAL ELECTRICAL OK 2-8-89 *[Signature]*

THE OWNER'S AFFIDAVIT

I further certify that all work will be done by me personally, for myself, without any outside help, other than a licensed and duly qualified contractor as required by law.

Signed _____

CITY OF CORAL GABLES

BUILDING & ZONING

MECHANICAL PERMIT APPLICATION

DATE: December 19, 1988

Job Data
I hereby make application for a permit to cover
INSTALLATION OF:

TYPE Air Cond.

SPACE HEATERS

CENTRAL HEATING 7 in-w (1) 25.00

AIR CONDITIONING (WIND)

AIR CONDITIONING (CENTRAL) 3 1/2 Ton (1) 49.00

DUCT WORK ONLY 8 drops 35.00

REFRIGERATION

PROCESS AND PRESS. PIPING

UNDERGROUND TANKS

ABOVE GROUND TANKS

U.F. PRESSURE VESSELS

STEAM BOILERS

HOT WATER BOILERS

MECHANICAL VENTILATION

INTERNAL COMBUSTION ENG.

AUTO SPRAY BOOTH

FIRE SPRINKLER SYSTEM

COOLING TOWERS

MISC.

COND. DRAIN (1) 10.00

TOTAL FEE --- 118.00

BUILDING PERMIT NO: Exst MECHANICAL PERMIT NO: 6518

EST. COST: \$ 4883.00

CONTRACTOR'S FIRM Central Compact Corps.

CONTRACTOR'S ADDRESS 7800 NW 62 St. PHONE 305/591-8585

OWNER'S NAME Mrs. Phillips

JOB ADDRESS 1021 Milan Ave.

CITY Coral Gables Fl. PHONE 305/662-1934
305/325-1661

LOT --- BLOCK ---

SUBDIVISION ---

Application is hereby made to obtain a permit to do the work and installations as herein indicated. I certify that no work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in Dade County. I further certify that I have checked and am responsible for the adequacy of any existing systems to which the work described in this permit adds extension or makes changes.

SIGNATURE OF MASTER OR OWNER - BUILDER
Harold M. Park CA414252

MECHANICAL INSPECTION RECORD

Required Inspections	Inspectors Name	Date App.	Date Disap.	Other Insp. List Type, Extent Or Units Checked	Insp. Name	Date App.	Date Disap.
Heating							
	Rough Unit & Flue						
	Final Unit & Flue						
	Rough Ducts						
	Final Ducts						
Air Conditioning	Rough Unit						
	Final Unit						
	Rough Duct						
	Final Duct						
Refrigeration	Rough						
	Final						
Tank	Rough						
	Final						
Boilers	Rough						
Pressure Vessels	Final						
Ventilation	Rough						
	Final						
Misc. List	Rough						
	Final						

C.U. York HICF042506
A/H York NZHD014A06 BSC
10+ SEER

This space represents the lot. Indicate the building in space showing the distance front lot lines and other buildings.

CENTRAL COMFORT CORPS CCA 14252
 7860 N.W. 62 ST.
 MIAMI, FL. 33166

PHILLIPS
 1221 MILAN AVE
 Coral Gables, FL. 33184
 662-1934

NOTES:

1. York 3 1/2 Tons C.U.
2. York 3 1/2 Tons A/H.
3. 7.5 k.w Heat
4. 9 Duct Drops
5. ELECTRICAL BY OTHERS

