

CMA Design Studio, Inc.

ARCHITECTURE PLANNING INTERIOR DESIGN

February 17, 2021

City of Coral Gables
Board of Architects
427 Biltmore Way, 2nd Floor
Coral Gables, FL 33134

Re: 145 Leucadendra Drive, Coral Gables Florida.

145 Leucadendra Holdings LLC (the “Applicant”) is the owner of the property located at 145 Leucadendra Drive, in Coral Gables, Florida, which has a Folio number of 03-4132-019-0600 (the “Property”). The lot size is 36,098 SF consisting of lot 22, block B, as noted in plat book 60, page 37, of the public records of Miami-Dade County. To the west of the property is Leucadendra Drive and to the east is Coral Gables Waterway which ultimately feeds into Biscayne Bay. The Property is currently inhabited.

The proposed project consists of a single-family residence. The house is in the tropical modern style and uses landscaping and natural elements to seamlessly transition from inside to out. Planters integrated into the structure throughout the second story soften the elevations which complements the saw cut oolite stone cladding. Cumaru wood is used to bring warmth to the project and is used extensively in the eaves, screens, and columns. Other materials include dark bronze metal used on the doors and windows.

The Project of 145 Leucadendra works well with its natural environment and surrounding context. The project is a considerable improvement and addition to the fabric of this city. We respectfully request your favorable consideration of this submittal and look forward to continuing to work with the City on this Project.

Sincerely,

A handwritten signature in blue ink, appearing to read 'C. Molina', with a long horizontal flourish extending to the right.

Cesar A Molina
Principal



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: 145 Leucadendra Drive

Property/Project Name: 145 Leucadendra Holdings LLC Residence

Legal description: Lot(s) Gables Estates No 2 PB 60-37

Block(s) B Section(s) Lot 22

Folio No. 03-4132-019-0600

Owner(s): 145 Leucadendra Holdings LLC

Mailing Address: 232 Andalusia Ave Suite 101, Coral Gables, FL 33134

Telephone: 305-448-4200

Fax

Other Email Lconn @cmads.com

Architect(s)/Engineer(s)/Contractor(s): CMA Design Studio Inc.

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 232 Andalusia Ave., Suite 101, Coral Gables, FL 33134

Telephone: 305-448-4200

Business

Fax

Other Email Cmolina @cmads.com

Project Information

Project Description(s): New single family residence including decks, doors and windows, site walls, water feature, driveway, exterior CBS walls, fences, landscaping, roof, railings, louvers, and pool

Estimated project cost*: \$3,213,600

(*Estimated cost shall be +/- 10% of actual cost)

Date(s) of Previous Submittal(s) and Action(s): Gables Estates Preliminary Approval- 01/19/21



Board of Architects Review Application

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: Cesar Molina		Agent/Owner Signature:	
Address: 232 Andalusia Ave., Suite 101, Coral Gables, FL 33134			
Telephone: 305-448-4200		Fax:	Email: Cmolina@cmadsi.com
	Architect(s)/Engineer(s)/Contractor(s) Print Name: Lynsie Conn		Architect(s)/Engineer(s)/Contractor(s) Signature:
	Address:		
	232 Andalusia Ave., Suite 101, Coral Gables, FL 33134		
	Telephone: 305-448-2400		Fax:
Email: Lconn@cmadsi.com			
STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE) Sworn to or affirmed and subscribed before me this <u>21st</u> day of <u>April</u> in the year 20 <u>21</u> by <u>Cesar A. Molina</u> who has taken an oath and is personally known to me or has produced as identification.		STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE) Sworn to or affirmed and subscribed before me this <u>21st</u> day of <u>April</u> in the year 20 <u>21</u> by <u>Lynsie Conn</u> who has taken an oath and is personally known to me or has produced as identification.	
My Commission Expires:		My Commission Expires:	