

800 Coral Way, Coral Gables, FL 33134

2016 NOV 23 PM 1:53

**Legal Description**

CORAL GABLES SEC A PB 5-102  
LOTS 9 & 10 BLK 1  
LOT SIZE 19750 SQ FT  
OR 18380-4461 1198 1  
COC 23372-4145 05 2005 4

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**Project Description**

**Historical – Preliminary Addition**





23 PM 1-54  
ADDRESS





WATERWAY OF NW 1st E

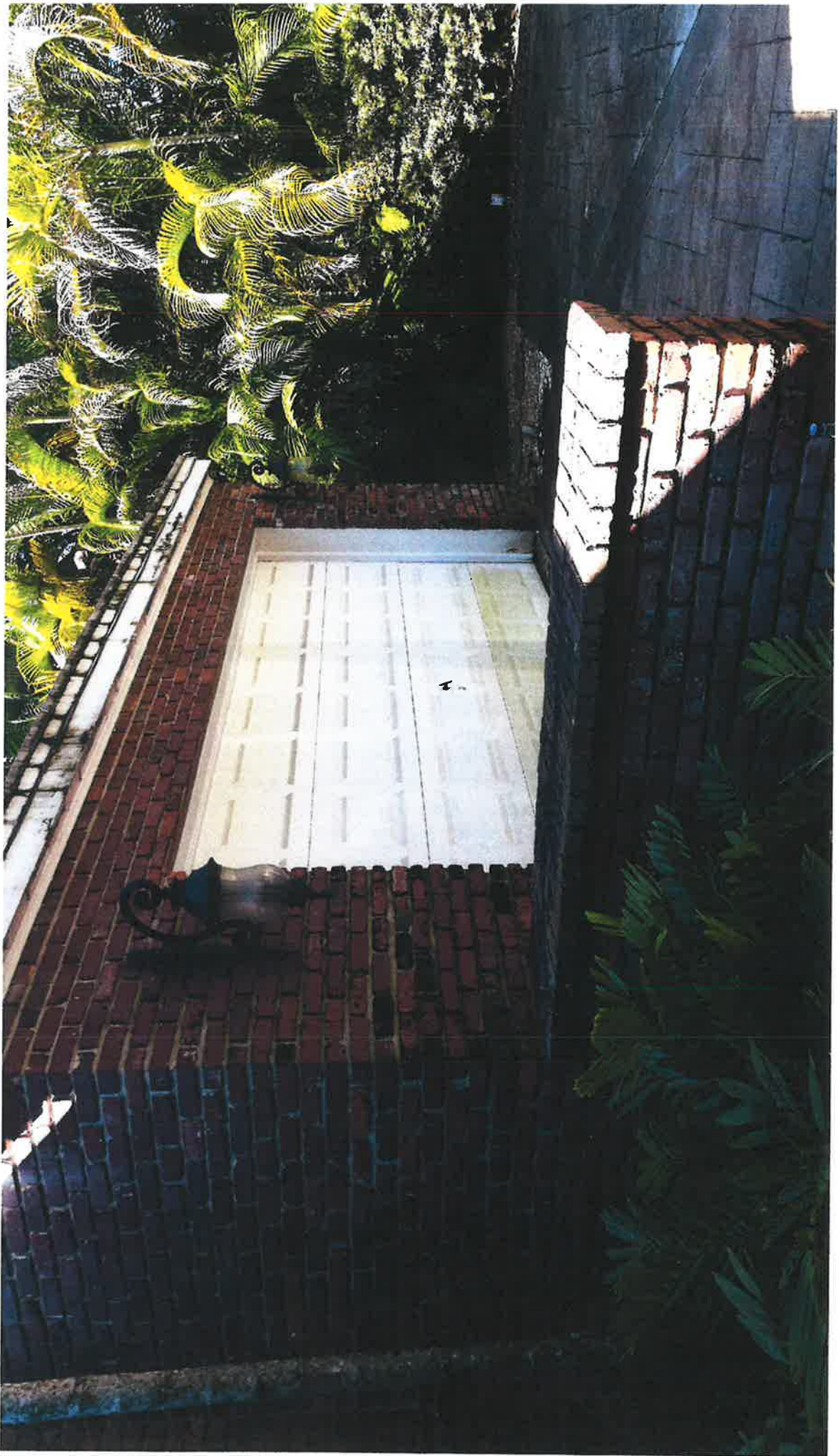


# 2



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OFFICE OF MEDICAL AFFAIRS  
STATE OF CALIFORNIA  
DEPARTMENT OF HEALTH CARE SERVICES





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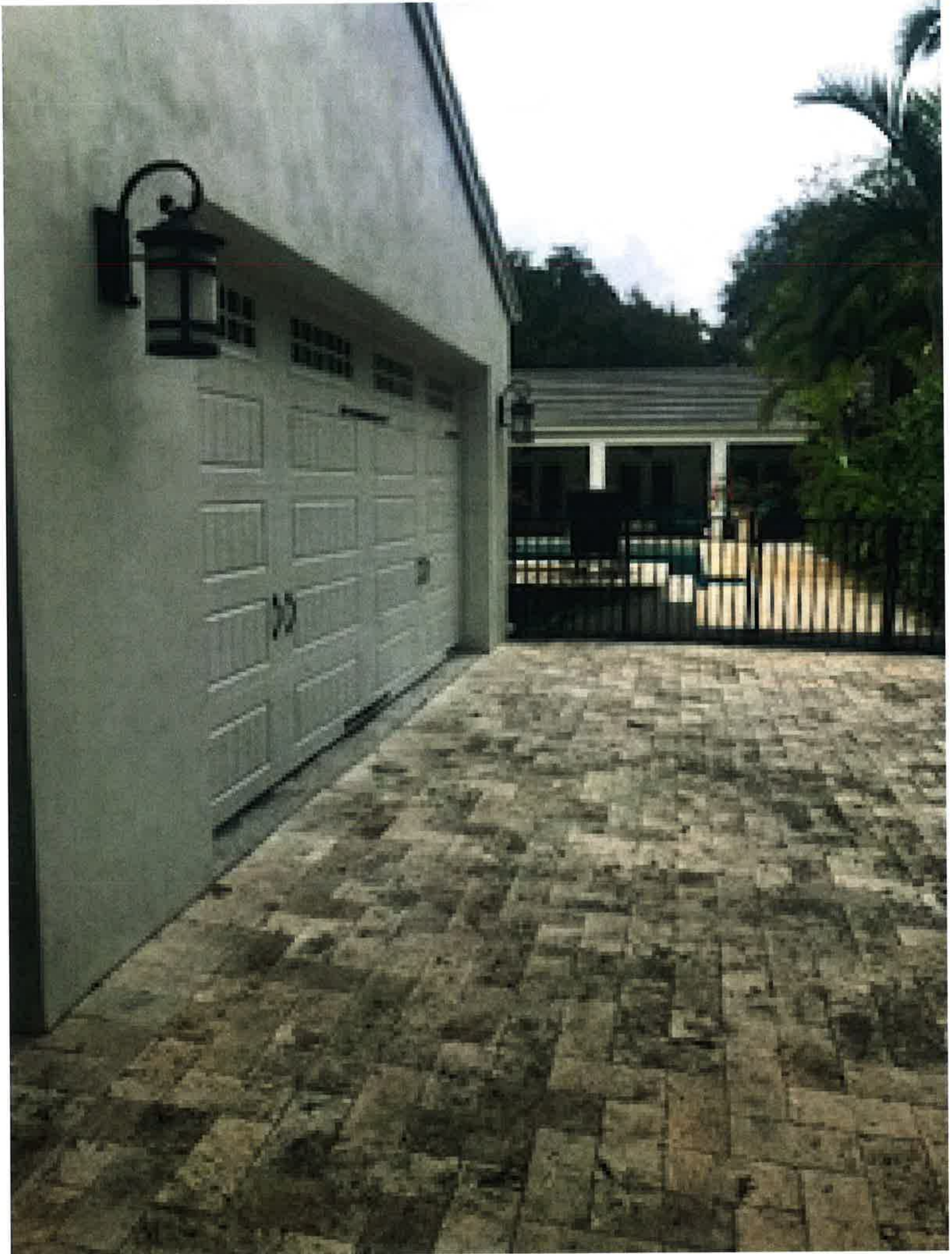






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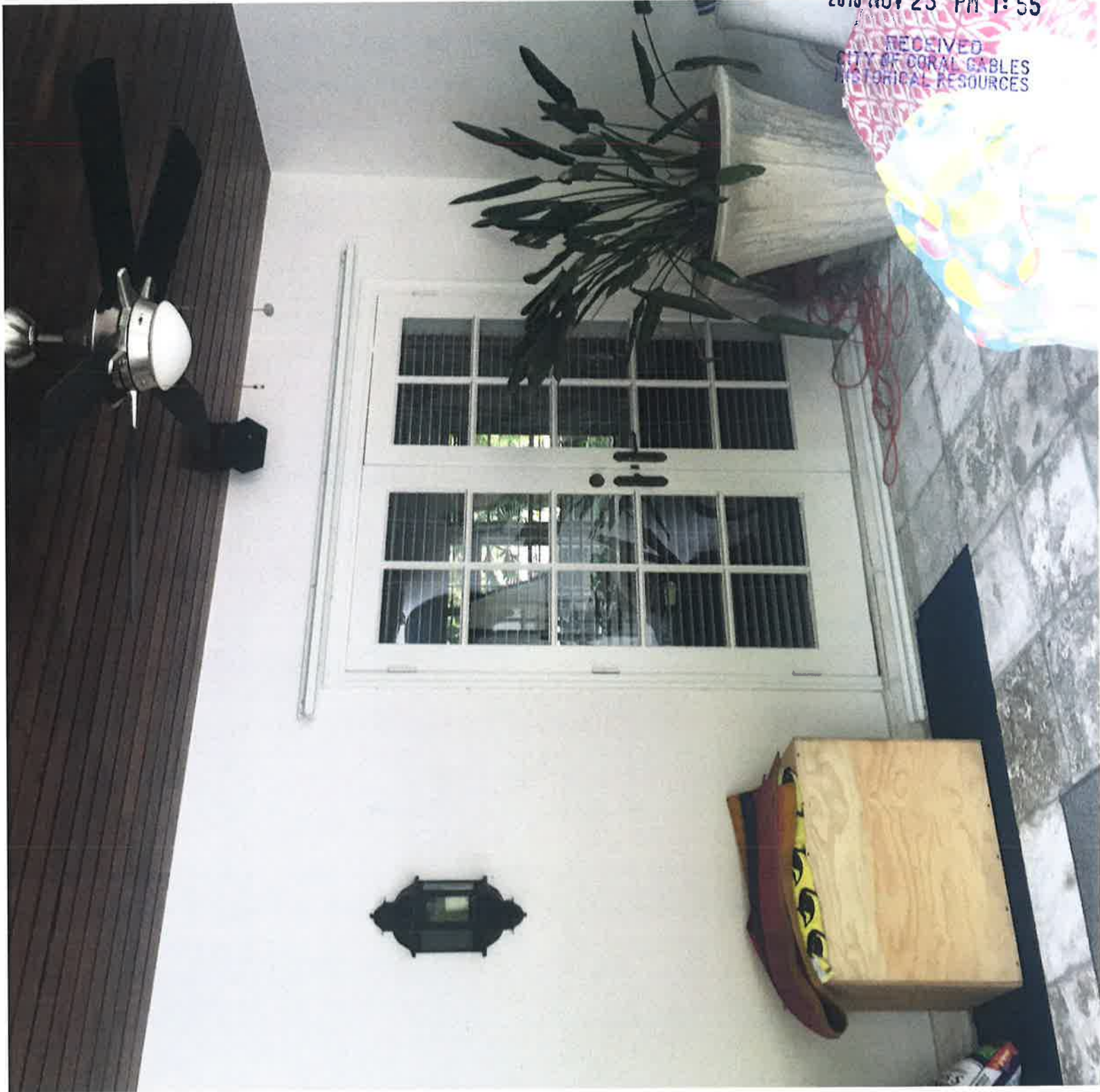
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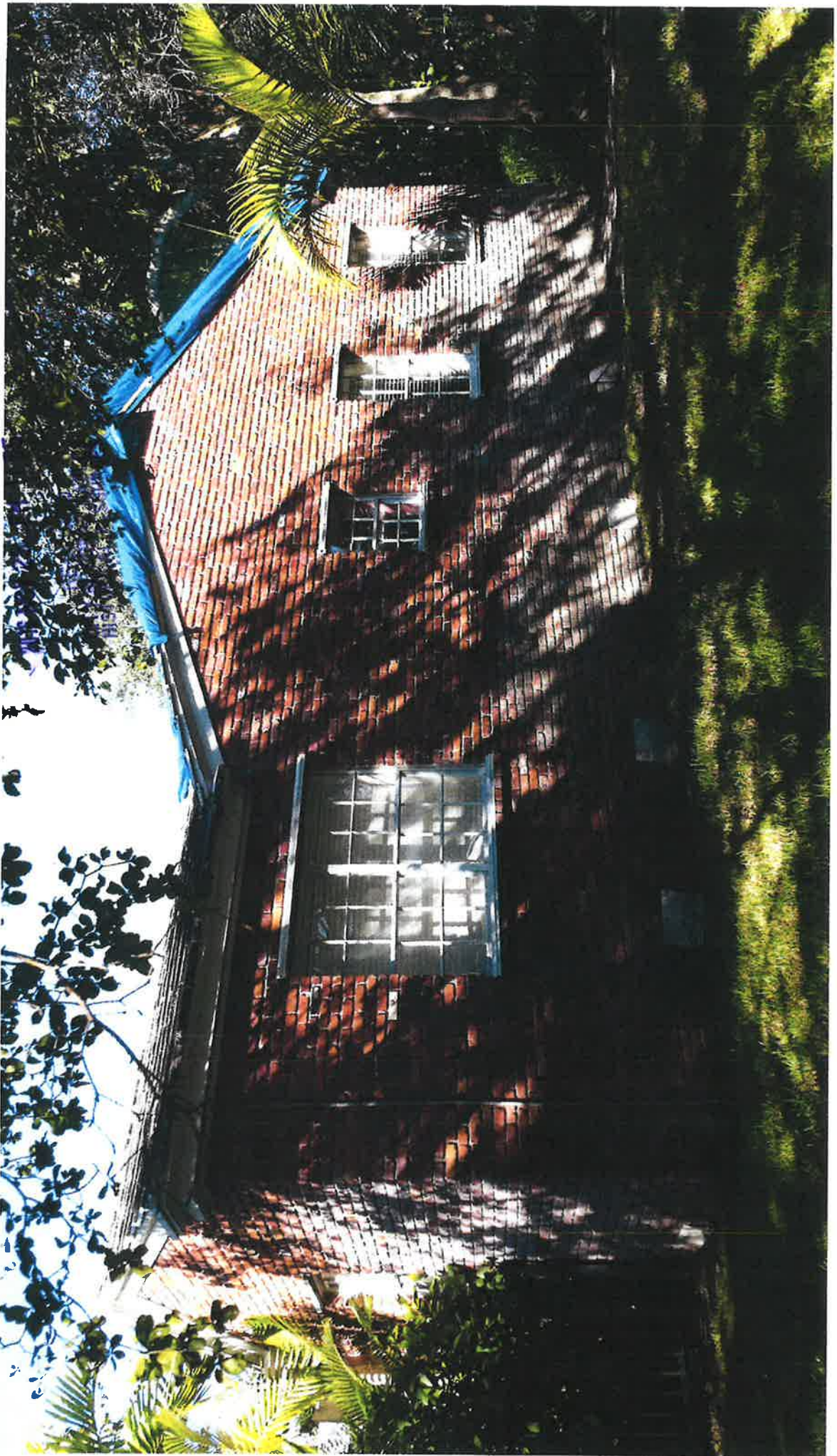


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#16





MIAMI-DADE COUNTY  
HISTORIC PRESERVATION AD-VALOREM TAX EXEMPTION

PART 1 – PRECONSTRUCTION APPLICATION

INSTRUCTIONS:

Type or print clearly in black ink. You may attach additional sheets if more space is needed.

I. PROPERTY IDENTIFICATION AND LOCATION

Historic/Site Name: \_\_\_\_\_

Property Address: 800 Coral Way, Coral Gables, FL 33134

Folio Number: 03-4118-001-0060

Legal Description: 185441 Coral Gables Sec A PB 5-102

LOTS 9 & 10 BLK 1 LOT SIZE 19750 SQ FT

Please check all that apply:

<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

- Designated as a local historic landmark or site
- Designated as a contributing structure within a local historic district
- Individually listed in the National Register of Historic Places
- Is a contributing structure in a National Register District

Name of District Coral Way Historic District

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Please attach the designation report and resolution as proof the property is designated.

II. OWNER INFORMATION:

Name(s) of Owner(s): Angelica Guiteras, Greg Guiteras

Mailing Address: 800 Coral Way, Coral Gables, FL 33134

Phone: 305-753-3670 2<sup>nd</sup> Phone: 305-776-2132

Email: angieandemma@gmail.com, gregolorrainetravel.com

If the property has multiple owners, please attach a list of all owners and their mailing addresses.

III. CURRENT PHYSICAL DESCRIPTION OF PROPERTY:

A. General Information

Date of Construction: 1957 Architect (if known): Curtis Haley

Alterations: Please provide the date and description of any physical alterations to the property. [Example: Original casement windows were replaced with jalousie windows around 1974.]

Windows replaced 1991, new gate 1989  
Addition for master bedroom 1992, Pool 1992

Additions: Please provide date and description of any additions which may have been made. [Example: A rear bedroom and bath were added to the house in 1981.]

Addition for master bedroom 1992

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B. Exterior Description

Roof Type: Gable Roof Material: Flat Cement tile  
Example: hip, gable, flat, etc Example: barrel tile, asphalt shingle, etc

Number of Stories: 1 Detached Garage? (Y/N) (N)

Basic Floor Plan: L shaped  
Example: square, "L" shaped, "U" shaped, rectangular, irregular, etc

Main Window Type(s): Single hung  
Example: casement, fixed, single hung sash, jalousie, awning, etc

Siding Material(s): North / EAST BRICK, WEST / SOUTH Facade  
Example: stucco, wood frame, brick STUCCO.

Briefly describe any distinguishing Exterior Architectural Features:

[Example: the placement of the windows, chimneys, porches, columns, etc]

Most of the significant exterior historical features of this house is the brick which can be found on the front and side view.

There is a fireplace chimney in the living room.

THERE IS A LARGE BAY WINDOW THAT ENCOMPASSES THE FRONT OF HOUSE.

**C. Interior**

Please list any distinguishing **Interior Architectural Features** found in the home that are original to the house, by room: [Example: The dining room retains the original decorative crown molding and tile floor. The living room retains the original limestone fireplace.]

The living room will retain the brick fireplace chimney.

**D. Auxiliary Structures**

Please describe the present appearance of any auxiliary structures on the property, such as garages, cabanas, outbuildings, perimeter walls, etc. The only auxiliary structure pertaining to the lot is the perimeter wall.

Prior to the construction of the residence the city master plan created a plaza at the intersection of Coral way & Desoto, which included the perimeter wall.

**IV. DESCRIPTION OF PROPOSED IMPROVEMENTS**

All improvements to historic properties will be evaluated for their consistency with the Secretary of Interior Standards for Rehabilitation. The application must include labeled photographs of both the interior and exterior of the property which clearly show the property and its characteristics.

What was the original use of the building? Residential

What will the building be used for after improvements? Residential

What is the estimated start date of construction? Dec. 12<sup>th</sup>, 2016

What is the estimated completion date? October 31<sup>st</sup>, 2017

What is the estimated cost of restoration/rehabilitation? 525,000

Briefly describe your project, including any proposed additions, upgrades and restorations.

CURRENT HOME IS UNDERGOING AN INTERIOR AND REPAIR WORK TO DAMAGED WALLS, CEILINGS, AND WOOD FLOOR. ALL EXTERIOR WINDOWS WILL BE REPLACED WITH HURRICANE IMPACT. WE ARE ADDING 1,200 SQ FT TO THE BACK OF THE HOUSE THAT WILL INCLUDE TWO SMALL BEDROOMS, JACK & JILL BATHROOM, A MASTER BATH, A MASTER BEDROOM, AND A GARAGE WITH NEW DRIVEWAY. ALL THIS WILL TAKE PLACE AS AN ADDITION TOWARDS THE BACK OF THE PROPERTY. THE FRONT FACADE WILL REMAIN INTACT. WE WILL BE ADDING BLACK SHUTTERS TO ALL WINDOWS TO MATCH THE FRONT OF HOME THAT HAS BRICK.

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**A. EXTERIOR ARCHITECTURAL FEATURES**

The following represents an itemization of work to be accomplished. List each principal architectural feature affected and describe the impact that restoration/rehabilitation will have on it. Label which elevation(s) contains that feature, and include a corresponding photograph for each. Please attach additional sheets if necessary.

**FEATURE 1: Decorative Storm Shutters**

**Elevation:** South & East Elevations on Existing residence.

**Photo Number:** # 15

**Plan Number:** A 201

**Describe Work and Impact on Existing Feature:** ADD Decorative Shutters to existing windows that were previously removed to match original design.

**FEATURE 2: Replace Garage door with a recessed CMU wall**  
New impact resistant windows & stucco wall.

**Elevation:** North

**Photo Number:** # 4, #5

**Plan Number:** A. 202

**Describe Work and Impact on Existing Feature:** Garage is relocated to rear of property with direct access from De Soto Blvd. Existing garage door is replaced with new CMU wall with window openings & stucco raised panels, recessed back 8" from brick facade to recall the historical feature of the original garage.

**FEATURE 3:**

**Elevation:**

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 4:**

**Elevation:**

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

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**B. INTERIOR ARCHITECTURAL FEATURES**

**FEATURE 1:**

**Room:**

N/A

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 2:**

**Room:**

N/A

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 3:**

**Room:**

N/A

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 4:**

**Room:**

**Photo Number:**

**Plan Number:**

**Describe Work and Impact on Existing Feature:**

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**C. LANDSCAPE FEATURES**

Please list any restorative work to be done to **original landscape features**, including pathways, walls, fountains, etc. Include a site plan or sketch if necessary.

Landscaping plans have not been completed, but extreme care will be taken to match the landscaping to the surrounding areas.

**FEATURE 1:**

**Photo Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 2:**

**Photo Number:**

**Describe Work and Impact on Existing Feature:**

**FEATURE 3:**

**Photo Number:**

**Describe Work and Impact on Existing Feature:**

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**OWNER ATTESTATION:** I hereby attest that the information provided in this application is, to the best of my knowledge, correct, and that I own the property described above or that I am legally the authority in charge of the property. Further, by submission of this Application, I agree to allow access to the property by representatives of the appropriate official in which the property is located, for the purpose of verification of information provided in this Application. I also understand that, if the requested exemption is granted, I will be required to enter into a Covenant with the municipality and Miami-Dade County in which I must agree to maintain the character of the property and the qualifying improvements for the term of the exemption.

Angelica Cuiteras

Print Name



Signature

11/23/16

Date

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[Please attach the photographic documentation on subsequent pages.

Submit a copy of all photographs on a CD as well, if possible.]



**MIAMI-DADE COUNTY  
HISTORIC PRESERVATION AD-VALOREM TAX EXEMPTION**

**PART 2 – REQUEST FOR REVIEW OF COMPLETED WORK**

**INSTRUCTIONS:**

Upon completion of the restoration, rehabilitation, or renovation, return this form **with photographs of the completed work (both exterior and interior views of the building)** to the County's Office of Historic Preservation (OHP).

Each photograph must be clearly labeled, and they should be the same views as the before photographs that were included in the Preconstruction Application.

If there are conditions included as part of the Final Recommendation from the local Historic Preservation Officer, the application will not be considered complete until all conditions have been met and acknowledged by the local Preservation Officer.

**I. Property identification and location:**

Property Name: 800 CORAL WAY ANGELICA & Greg Guiteras

Folio Number: 03-4118-001-0060

Street Address: 800 CORAL WAY

**II. Data on restoration, rehabilitation or renovation project:**

Project start date: DECEMBER 12<sup>th</sup> 2016

Project completion date: OCTOBER 10<sup>th</sup> 2019

Cost of entire project: \$ 635,000

Estimated costs attributed to work on historic buildings: \$ 600,000

Name of architect: Raphael Tapanes Phone: 305-975-9035

Name of Contractor: EKON BUILDERS Phone: 305-667-2255

**Owner attestation:** I hereby apply for the historic preservation property tax exemption for the restoration, rehabilitation or renovation work described above and in the Preconstruction Application for this project which received approval on November 23rd, 2016.

I hereby attest that the information provided is, to the best of my knowledge, correct, and that in my opinion the completed project conforms to the Secretary of Interior's Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings and is consistent with the work described in the Preconstruction Application. I also attest that I am the owner of the property described above or, if the property is not owned by an individual, that I am the duly authorized representative of the owner. Further, by submission of this application, I agree to allow access to the property by representatives of the County Historic Preservation Office and the Office of the Property Appraiser, for the purpose of verification of information provided in this application. I understand that, if the requested exemption is granted, I will be required to enter into a Covenant with Miami-Dade County granting the exemption in which I must agree to maintain the character of the property and the qualifying improvements for the term of the exemption. I also understand that falsification of factual representations in this application is subject to criminal sanctions pursuant to the Laws of Florida.

Angelica Cuiteras

Print Name



Signature

11/15/2019

Date

*Complete the following, if signing for an organization.*

\_\_\_\_\_

Print Name

Title

Signature

Name of Organization \_\_\_\_\_

Taxpayer Identification Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Telephone Number \_\_\_\_\_

*Multiple owners must provide the same information as above. Use additional sheets if necessary.*



2016 tax bills are payable on November 1, 2016.  
The information contained herein does not constitute a title search or property ownership.  
Delinquent Taxes must be paid by cashier's check, money order, or certified funds.

2016 Roll Details — Real Estate Account At 800 CORAL WAY, Coral Gables 33134-4823

Real Estate Account #03-4118-001-0080

Parcel details

Latest bill

Full bill history

Print this page

2016	2015	2014	2013	...	2005
PAID	PAID	PAID	PAID		PAID

PAID 2016-11-16 \$10,547.89  
Effective 2016-11-15  
Receipt #EEX-17-000016

Owner: GREGORY I GUITERAS  
800 CORAL WAY  
CORAL GABLES, FL 33134  
and 1 other  
Situs: 800 CORAL WAY  
Coral Gables 33134-4823

Account number: 03-4118-001-0080  
Millage code: 0300 - CORAL GABLES  
Millage rate: 19.09460  
Escrow company: WELLS FARGO HOME MORTGAGE (686)  
1 HOME CAMPUS MACX2302-04D  
DES MOINES, IA 50328-0001

Assessed value: 612,166  
School assessed value: 612,166

Exemptions

ADDL HOMESTEAD: 25,000  
HOMESTEAD: 25,000

Property Appraiser

2016 Annual bill

View

Ad valorem: \$10,917.39  
Non-ad valorem: \$70.00  
Total Discountable: 10987.39  
No Discount NAVA: 0.00  
Total tax:

Legal description

18 54 41 CORAL GABLES SEC A PB 5-102 LOTS 9 & 10 BLK 1 LOT SIZE 19750 SQ FT OR 18380-4461 1198 1 COC 23372-4145 05  
2005 4

Location

Range: 41E  
Township: 54S  
Section: 18  
Block: 60  
Use code: 0101  
Total acres: 0.000

Addresses

Other owners: ANGELICA GUITERAS

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