CERTIFICATE OF APPROPRIATENESS A P P L I C A T I O N CITY OF CORAL GABLES - HISTORICAL RESOURCES AND CULTURAL ARTS DEPARTMENT

1.					Dissipation (Cons.)	
	Building Address		Historic name of building (i	t any)	District Name (if any)	
	Legal Description: Lot(s)		Block(s)		Section	
(Requir	Owner's Name	-	Street Address	Zip Code	Phone No.	
(Require	Applicant's Name		Street Address	Zip Code	Phone/Fax	
(Require	Contractor/Arch/Engineer's Named) e-mail:	ie	Street Address	Zip Code	Phone/Fax	
2.	PLEASE INDICATE THE CATEGORY WHICH DESCRIBES THE PROPOSED WORK:					
	Minor Alterations Demolition	New Constructi Other:	ionAddition	Rehabilitation		
3.	Will the work proposed re	•	the Zoning Code?			
	□ NO □ YES, from se	ction(s)	ested variance language to	this form		
4.	Has this property been qua	alified as a Coral Gab	les Cottage? NO	YES (attach a copy of	f qualification sheet)	
5.	This request is: new	result of a violatio	n a revision to a pro		evision to a previously approved COA	
6.	WORK PROPOSED: Brid	of narrative of work to				
7.	Variance requests require a processing fee. Payment must be included with the application. Please make check payable to the City of Coral Gables. Applications for ad valorem tax relief must be filed on a separate application form prior to construction.					
STAFF USE ONLY	The following supplementary information (where applicable) shall be provided:*					
	Site Plan (with dimensions)Floor Plan(s) (with dimensions)Elevations(s) (with dimensions)Mailing list & 3 sets of labels Before/After Before/After VARIANCES/DEMOLITIONS					
	Photos Survey(5 yrs or younger) Labeled Board review (1 Orig + 16 copies) 2 per page Non-Board (1 original) Color/Material Sample Letter of Intent Board review (16 copies) Non-Board review (16 swatches) Non-Board review (16 copies) Non-Board review (1 copy) Non-Board review (1 copy) Non-Board review (1 set)					
STA	Copy of Board of Ar Comments/Recomm		CD/USB with electronic copies of submittal items	Fee variance or violations only	PowerPointOther on CD/USB	
1			-	-	hed due date (subject to staff review).	
•	Applications will be accepted only when a completed application form is submitted together with the necessary supplemental materials.					
	All drawings & supporting information must be collated into the correct number of packets and clearly labeled. Applicant or his/her representative MUST attend hearing and present his/her proposal to the Board.					
		Board of Architects recommendation <u>MUST</u> be obtained prior to the submission of any Certificate of Appropriateness application.				
•	The Historic Preservation Board will act on completed applications only. Decisions made by the Board may be appealed to the City Commission no later than 10 days after the ruling is made. If there is no appeal or Commission action, the Historic Preservation Board decision shall be final.					
o.	I,		, as O	wner of Lot(s)	·	
					do hereby authorize the	
	filing of this application(Owner's Signature) (Date)					
	My signature affirms and certifies that I/we understand and will comply with the provisions and regulations of the City of Coral Gables Historic Preservation Ordinance as amended from time to time. It further certifies that any statements made in the application, documents attached to the application, and plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that the application, attachments and fees become part of the Official Records of the Historical Resources and Cultural Arts Department and are not returnable. The above signed consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this application and/or presentation to the Historic Preservation Board. Applicants seeking approval of alterations, demolitions and/or new construction acknowledge that the City may erect signs on the subject property, which state the proposed action and the date of the Historic Preservation Board meeting.					
USE	Cond		=======================================		CITY OF CORAL GABLES HISTORICAL RESOURCES &	
STAFF USE ONLY					CULTURAL ARTS DEPARTMENT 2327 SALZEDO STREET, 2 ^{NI)} FLOOR	
STA	Lond	POTENTIAL HPB MEETING			CORAL GABLES, FLORIDA 33134 Phone: (305) 460-5093 Fax: (305) 460-5097 e-mail: HIST@coral@ables.com	

e-mail: HIST@coralgables.com * A drawing set must include a site plan, floor plan(s), and elevations of all facades with sufficient dimensions to conduct a preliminary Zoning Analysis. The purpose of the A unawing set must include a site pian, toor pian(s), and elevations of all facades with sufficient dimensions to conduct a preliminary Zoning Analysis. The purpose of the preliminary Zoning Analysis is to identify possible variances and is not intended to replace any review required as part of the permitting process. The drawings must illustrate the existing conditions and the proposed changes separately. Contextual drawings or photographs of the neighboring properties must also be included. The Department staff may request additional drawings and documents as needed. Requests for Special Certificates of Appropriateness for demolition and/or that require variance(s) must include a certified mailing list. a map, and three sets of mailing labels (1000-foot radius) and the required fee. * It is the responsibility of the applicant to provide sufficient illustrations to convey the intended scope of work.