

Glenlamasis@gmail.com

CITY OF CORAL GABLES  
CONSTRUCTION REGULATION BOARD  
CONTRACTOR COMPLAINT FORM

1. Name of Complainant(s) Glenda Magally Masis Chacon & Miguel Angel Moreno Martin  
Affiant
2. Current address 440 Sansovino Ave, Miami, 33146
3. Address of location where the job was performed 440 Sansovino Ave, Miami, 33146
4. Contact telephone no. (305)-316-8491 or (305)-588-7360
5. What is the name and address of the company(s) or individual(s) you contracted with? Saad Remodeling Custom Home Builders, Inc.
6. What is the name(s) of the person(s) you deal with from that company?  
Angel Saad
7. Did the company or individual represent they were licensed?  Yes or  No. If yes, what license number did he/she/they use? CGC-1506816
8. What else was said, done, written or shown to you to cause you to believe the individual company was licensed?  
Reconstruction and Renovation Agreement, Business card (Both attached)
9. Did you enter into a written agreement/contract with that company or person?  Yes or  No.  
**If yes, please provide a copy of all written agreements/contracts entered into.**
10. What was the date the agreement/contract was entered into? 10/25/2017
11. What date (or approximate) did the work begin? 12/05/2017
12. What work was supposed to be done under the terms of the contract?  
Master bathroom, cabana bathroom and kitchen remodeling (Interior alterations)
13. What was the total amount to be paid under the contract? \$ 78,609.00
14. What were the terms of payment (draws) to be paid under the contract?  
Please refer to Proposed Draw Schedule attached to this Contractor Complaint Form and two additional Change of Order
15. Did you make any payments? If so, please list the date and amount of each payment and to whom the payment was given. If payments were different from the terms of the contract, please explain why they were different. **If checks were given, please provide copies of the front and back of all checks. Important! Please fill this portion out completely.**

Date of Payment	Amount	Reason for Payment
<u>10/27/17</u>	<u>\$ 21,000.00</u>	<u>Initial deposit</u>
<u>12/12/17</u>	<u>\$ 7,350.00</u>	<u>Draw 1: Floor demolition/Floor tile delivered (incomplete)</u>
<u>12/21/17</u>	<u>\$ 7,350.00</u>	<u>Draw 3: Floor tile installation/Wood trim removed (incomplete)</u>
<u>01/12/18</u>	<u>\$ 7,350.00</u>	<u>Draw 4: Bathroom demolition/New plumbing/New electrical</u>
<u>03/21/2018</u>	<u>\$ 4,900.00</u>	<u>Draw 2: Kitchen cabinets/Bathroom cabinet ordered (not done)</u>
<u>12/28/2017</u>	<u>\$ 3,738.00</u>	<u>Change of order 1: Cabana bathroom remodeling</u>
<u>12/28/2017</u>	<u>\$ 1,137.00</u>	<u>Change of order 2: Kitchen hood</u>

16. To your knowledge, was a permit obtained?  Yes or  No.  
By whom? Saad Remodeling Custom Home Builders, Inc

CITY'S

EXHIBIT 1

17. Please provide a brief summary of the nature of your complaint.

Very poor workmanship on the job including potential code violations.  
Time for development of the project not reasonable.  
Non professional behavior and lack of responses or explanations regarding the project and disrespectful verbal communication.  
Bad suppliers and providers management including payments and work schedule.  
Damages caused to premises and no responsibility taken.

18. Describe the extent of work done by the contractor. And if you know, what is the estimated value of the work done? Partial floor installation and incomplete master bathroom remodeling (\$15,000.00)

19. When or what date was the last time the contractor performed work? 04/24/18

20. Did he/she work steadily from the date he/she started work?  Yes or  No

21. Have you had conversations with the contractor regarding your complaint since he/she stopped or finished work?  Yes or  No  
If yes, explain. Attached all mails sent

22. To your knowledge, have any inspections been performed by the Development Services Department?  Yes or  No

23. Have you had any independent sources inspect the work, such as an architect, engineer or another contractor? If so, what was their determination? If a report was made, please attach a copy of their report.  Yes or  No

Quality of job is very poor and recommend to demolish and rebuild.

24. Have any liens been filed against your property by the contractor, subcontractor or suppliers?  Yes or  No

25. Have you filed a civil suit against the contractor?  Yes or  No

X [Signature]  
Affiant (property owner or authorized representative)

STATE OF FLORIDA )

ss

COUNTY OF MIAMI-DADE )

Sworn to or affirmed and subscribed before me this 2<sup>nd</sup> day of May, 20 18 by Glenora Magally Masio Chacon who has taken an oath and is personally known to me or has produced FL DL 2 as identification.

m222-293-76-597-0

My Commission Expires:



[Signature]  
Notary Public

## RECONSTRUCTION & RENOVATION AGREEMENT

This AGREEMENT is made and entered into as of \_\_\_\_\_, by Saad Remodeling & Custom Home Builders, Inc. CGC-1506816 and between Miguel Angel Moreno Martin and Glenda Magally Masis Chacon (The "owner"), whose mailing address is 440 Sansovino Ave Coral Gables, FL 33146 and Saad Home Remodeling & Custom Home Builders, Inc. (THE CONTRACTOR), whose mailing address is 18191 NW 68 Ave, STE #104, Miami Lakes, FL 33015.

### RECITALS

- A. Owner is the fee simple titleholder of the following described property (the property).

**440 Sansovino Ave Coral Gables, FL 33146  
Coral Gables Riviera Sec 2 REV PB 28-18 LOT 4 & 5 BLK 101**

- B. Owner desires to engage contractor to repair and/or reconstruct or add to the residence on the Property, and Contractor desires to be so engaged, subject to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of ten and No/100 dollars and for other good and valuable consideration. The receipt and sufficiency of which are hereby acknowledged, Owner and contractor agree as follows.

1. **Recitals & Representations**

The foregoing recitals are true and correct and incorporated herein as if repeated at length. Owner represents and warrants to Contractor that owner (including all persons who constitute "the owner" if more than one person executes this agreement (as owner) is the sole fee simple title holder to the property, and that is no legal impediment to the execution and legal enforcement of this Agreement.

\$ 70,000 (The Contract Sum)

\$ 21,000 (Deposit when contract is signed)

\$ 49,000 (Balance)

2. **The Work**

Contractor shall perform all of the work free from all liens set forth in the feature list and plans and specs, attached to the Agreement in connection with the repair and/or reconstruction of the residence on the property for a fixed price (subject to the provisions of this agreement):

1. The performance of the Work shall include the following duties

- A. Contractor shall supervise and direct all work, using its best skill and attention. The Contractor shall be solely responsible for all construction means, methods, techniques, sequences, and procedures and for coordinating all portions of the work under the contract.
- B. Unless otherwise specifically noted, the contractor shall provide and pay for all labor materials, equipment and machinery, and other facilities and services necessary for the proper execution and completion of the work. Owner shall be responsible for all impact fees by any governmental agency, all utility fees needed to obtain any building permits, and all required building permit fees.
- C. Contractor shall all times keep the job site reasonably free from accumulation of waste materials and rubbish and shall keep noise and dust from the work to a minimum. Upon completion of the work, contractor shall (i) clean the job site of any all debris left, contractor shall (i) clean the job site of any and all debris left, (ii) deliver the job site in a reasonably neat condition consistent with the plans and specifications; contractor shall be responsible for any code enforcement tickets or violations issued by governmental authorities and

- D. One of the following, shall be included in this Agreement:
- o The initial floor plans given by Contractor to Owner must be approved by Owner before final plans are completed by the Architect.
  - o The initial floor plans given by Owner to Contractor must be mutually agreed upon by Owner and contractor before final plans are completed by the Architect.
  - o The Home will be constructed according to plans and specifications to be given to Contractor by the owner.
  - o In the event the parties do not agree on the initial floor plans not supplied by Owner, Contractor shall return 50 percent of all deposits to Owner and this Agreement shall be terminated. After the parties agree upon the initial floor plans or after Contractor accepts plans supplied by owner, all deposits paid by Owner shall be non-refundable and this Agreement shall be binding upon both parties.

E. The Architect for this project is: Carlos A. Marti

F. Contractor shall give notices and reply with applicable laws, ordinances, rules, and regulations bearing on the performance of the work.

G. Owner agrees that Contractor shall remain the sole general contractor on the property for the duration of the contractors work. Contractor agrees that Owner may elect to hire certain subcontractors directly or source certain materials or other items directly, provided at least two weeks' prior notice is given to Contractor and such work or materials are not subject to inspection by state or local officials for compliance with building code or other legal requirements since Contractor's license will be used to obtain required building permits. In the event Owner exercises this right, Owner and Contractor will agree a reasonable mark-up for overhead and profit of not less than \_\_\_% calculated over the total cost of the services, materials or other items provided by subcontractors or suppliers directly hired by Owner. In addition, Contractor shall have the right to match any price obtained by Contractor (taking into account the agreed mark-up for overhead and profit) by giving notice to Owner within three days of receiving the initial notice from Owner, and so long as Contractor's proposal is of the same quality and characteristics Contractor shall have the right to provide the work or materials directly instead of Owner's subcontractor or supplier. Except as provided in this paragraph, no other besides Contractor and subcontractors and workmen hired by Contractor shall be allowed to perform work on the property until the contractor's work is completed. Owner shall not interfere with subcontractors and workmen doing and during construction and is to deal only with the contractor.

This contract does not apply to preexisting latent or hidden defects that require repair to complete the remodeling. Upon discovery of such defect, Saad shall notify and explain to the homeowner both the nature of the defect and the cost to repair. With the homeowner's consent, which may be written or oral, Saad will perform the repair for an additional fee, equal to all related costs of repair plus ten percent.

H. Notwithstanding anything to the contrary contained in this agreement, contractor shall not be responsible to the owner or any other person for any personal injury caused by the tortuous act of any subcontractor or any person employed by any Subcontractor.

## 2. Time of Commencement and Completion.

A. Subject to the provisions of paragraph 5 bellow, contractor shall commence the work within a reasonable time following the date of this Agreement and the issues of the building permit and prosecute the work to substantial completion as best as possible.

3. **Payments the Contractor.** Owner agrees to compensate and reimburse contractor as follows:
- A. **Contract Amount:** Owner agrees to pay Contractor, as/ compensation for Contractor's services, the Contract Sum as set forth above
  - B. **Progress Payment:** Owner shall pay Contractor progress payments as Bank Schedule of Payment. (Exhibit A)
  - C. **Final Payment:** Owner shall pay to Contractor the final payment upon achievement by Contractor of Substantial Completion the work as certified by the local building official, the lender, or a licensed engineer or architect after inspection of the Work. Contractor shall provide Owner at final payment with a final contractor's affidavit complying with S713.06 (3), Florida Statutes of the contract price, the price of all additional Work performed by the Contractor, and all other sums due under this agreement.

4. **Payment by Owner**

- A. Owner hereby represents to Contractor that it possesses or can readily obtain sufficient funds to pay the contract sum.
- B. If the Owner, including but not limited to any person making payments for the benefit of the Owner (e.g., a construction lender or insurer), fails to make payment of any sum required by this agreement, including payment of any draw or installment of the Contract Sum, for a period of ten days, the Contractor may, upon seven days' written notice to the Owner and the Lender or terminate this agreement and recover from the owner payment for all work executed to date provided contractor has abided by all of the items of lenders construction loan agreement.

5. **Warranty; Inspection**

- A. The contractor warrants to the Owner and the Architect that all materials and equipment incorporated in the work will be new unless otherwise specified, and that all work will be of good quality, free from faults and defects, and in conformity with the contract documents. All Work not so conforming to these standards may be considered defective. The Contractor shall correct any work that is defective and shall remedy any defects due to faulty materials, equipment, or workmanship that appear within a period of one year from the date of Substantial Completion of the Work. The contractor shall correct any work that fails to conform to the requirements of the contract documents that appears during the progress of the work. The Contractor's warranty excludes remedy for damage or defect caused by abuse, modifications not executed by the Contractor or accepted by the contractor in writing, improper or insufficient maintenance, improper operation, normal expansion or shrinkage, conditions inherent in materials selected, or normal wear and tear under normal usage. This warranty shall be void and of no force or effect if the Contractor has not been paid the full Contract Sum as provided in this agreement.
- B. At or shortly following the time the work has been substantially completed but before final payment to the Contractor, Owner will be given a thorough walk-through inspection of the property with a representatives of Contractor and together they will prepare a written inspection statement listing any discovered defects in materials, equipment, and/or workmanship, all of which defective items, shall be corrected in accordance with Contractor's warranty. However, correct any such defects will not be grounds for deferring any payments to be made to Contractor. Owner agrees not to interfere with or interrupt any workmen at the site of the construction. Owner shall have the right to have an architect, engineer, or licensed contractor inspect the work from time to time.

6. **Insurance**

Prior to commencement of any work under this Agreement, Contractor shall, at Contractor's expense, take out, maintain and pay for the following insurance in a form or forms and with a company or companies reasonably satisfactory to Owner and the lender covering all work under taken by contractor as follows.

- a. Workmen's compensation insurance in accordance with applicable law.
- b. Comprehensive general liability and automobile liability insurance.
- c. Any and all other insurance coverage required by applicable law.

7. **Notices**

- A. Any formal notices which either party may or must give each other under this agreement shall be in writing and shall be sent certified or registered mail, return receipt requested, or by hand delivery, telex, or telecopy, provided that the proof of receipt is maintained by the sender of such notices, shall be deemed delivered when mailed, except in case of international mail, in which cases notices shall be deemed delivered when received. Either party may change the address for the sending of notices to such party written notice of such change of addresses, but changes, but changes of address shall be deemed delivered upon receipt.

Either party to a home improvement contract may cancel the contract by the exercise of the right to rescind until midnight of the third business day following the execution of the contract by giving notice to the other party by either certified mail or registered mail. The party invoking the right to cancel the contract within this time frame is not liable to the other for any damages incurred by cancellation.

Payment may be available from the construction industries recovery fund if you lose money on a project performed under contract, where the loss results from specified violations of Florida law by state-licensed contractor. For information about the recovery fund and filing a claim, contact the Florida Construction Industry Licensing Board at the following telephone number and address Construction Industries Recovery Fund 1940 North Monroe Street, Suite 60, Tallahassee, Fl 32399 Phone: 850-921-6593.

- B. If contractor abandons the job site for a period of 15 days, subject to acts of force majeure, the owner may with 7 days prior written notice to contractor and lender terminate this contract and pay all sums due to contractor for work done to such date, provided owner complies with lender requirements as contained in the construction loan agreement.

8. **Arbitration**

All Claims or disputes arising out of this contract or the breach thereof shall be decided by arbitration in accordance with the Construction Industry Arbitration Rules of the American Arbitration Association then pertaining unless one of the parties do not agree with arbitration. If a dispute should arise and either party be delivered by certified mail to the other party to the Contract, and if the other party objects to arbitration, by certified mail within 10 days after receipt of the demand for arbitration, the arbitration is waived.

9. **Construction**

This agreement shall be governed, and construed and enforced in accordance with, the laws of the State of Florida. In construing this Agreement, the singular shall be held to include the plural, the plural shall be held to include the singular and the use of any gender shall be held to include every other gender.

10. **Severability**

In the event any term or provision of this Agreement shall be determined by appropriate judicial authority to be illegal; or otherwise invalid. Such provision shall be given its nearest legal meaning or be construed as deleted as such authority determines, and the remainder of this Agreement shall be construed in full force and effect.

11. **Counterparts**

This agreement may be executed in any number of counterparts, each of counterparts, each of which, when executed and delivered, shall be an original, but all counterparts shall together constitute one and the same instrument.

12. **Features**

See feature list for items including on this contract.

13. **Exhibits**

All of the exhibits attached to this agreement are incorporated in and made a part of this agreement.

14. **Entire Agreement**

This agreement constitutes the entire understanding and agreement between the parties and may not be changed, altered or modified except by instrument in writing signed by the party against whom enforcement of such change would be sought. This Agreement shall be binding upon the parties hereto and their respective successors and assigns.

15. **Special Provisions:**

16. **Contract Documents**

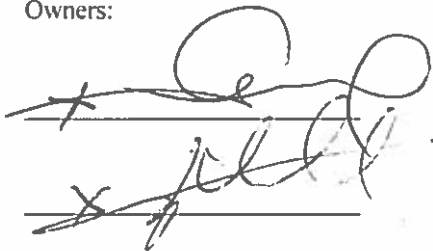
- a. The contract Documents (also referred to as the Agreement”) consist of the Reconstruction & Renovation Agreement Contract this set of Additional Terms and Conditions, the Drawings, Specifications, all addenda issued prior to execution of this Agreement, all Modifications issued subsequent thereto, and any written interpretations of the Contract Documents issued by the Architect. These form the Contract, and all are as fully a part of the contract as if attached to it or repeated therein.

- b. According to Florida's construction lien law (sections 713.001-713.37, Florida statutes), those who work on your property or provide materials and are not paid in full have a right to enforce their claim for payment against your property. If your contractor or a subcontractor fails to pay subcontractors, sub-subcontractors or material suppliers, the people who are owed money may look to your property for payment, even if you have already paid your contractor in full. If you fail to pay your contractor, your contractor may also have a lien on your property. This means if a lien is filed your property could be sold against your will to pay for labor, materials, or other services that your contractor or a subcontractor may have failed to pay. To protect yourself, you should stipulate in this contract that before any payments is made; your contractor's is required to provide you with a written release of lien from any person or company that has provided to you a "notice to owner". Florida's construction lien law is complex, and it is recommended that you consult an attorney.

17. **Chapter 558 Notice of Claim**

- a. Chapter 558, Florida statutes contains important requirements you must follow before you may bring any legal action for an alleged construction defect in your home. Sixty days before you bring any legal action, you must deliver to the other party to this contract a written notice referring to chapter 558 of any construction conditions you allege are defective and provide such person the opportunity to inspect the alleged construction defects and to consider making an offer to repair or pay for the alleged construction defects. You are not obligated to accept any offer which may be made. There are strict deadlines and procedures under this Florida law which must be met and followed to protect your interests.

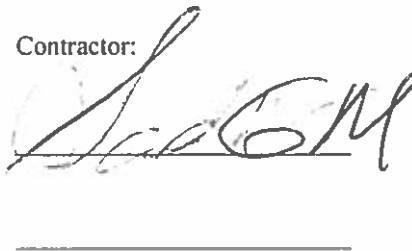
Owners:

  
Two handwritten signatures, one above the other, each with a horizontal line underneath it.

DATE:

10/25/17

Contractor:

  
A handwritten signature, possibly 'S. G. M.', with a horizontal line underneath it.

DATE:

10/25/17




Exhibit A

Schedule of Payment

Initial Deposit                    \$21000 (when contract is signed)

Additional Deposit                \$       

\*Balance remaining is to be paid using a construction progress schedule based on the same concept as a Bank Construction Schedule of Payment.

  
GM.  


Owner (s) Name: Martin-Chacon Residence  
 Contractor: Saad Remodeling & Custom Home Builders Inc  
 Job Location: 440 Sansovino Avenue, Coral Gables FL 33146

75.000  
 + 8.000  
 -----  
 83.000

**PROPOSED DRAW SCHEDULE**

**DRAW #1** 15% 20% 21.000

Floor demolition start → incomplete  
 Floor tile delivered → not all material

20% x 21.000 = 4.200  
 10% x 21.000 = 2.100

**DRAW #2** 10% 7.000

Kitchen cabinets ordered → not done  
 Bathroom cabinet ordered → not done

3.500  
 1.100  
 -----  
 4.600

**DRAW #3** 15% 7.500

Floor tile installation in progress  
 Wood trim removed → not done

50%

7.500

**DRAW #4** 15% 7.500

Bathroom demolition ✓  
 Remove fixtures ✓  
 New plumbing work ✓  
 New electric work ✓

✓

**DRAW #5** 15%

Kitchen cabinets removal  
 Fix walls  
 Plumbing work  
 Electric work

45%

**DRAW #6** 20%

Kitchen cabinets delivered  
 Bathroom completed

20%

**DRAW #7** 10%

All work completed  
 House clean



## CHANGE ORDER # 1

Owner's Name: <b>Miguel Moreno &amp; Glenda Masis</b> Job Name: Moreno residence Job's Address: 440 Sansovino Avenue, Coral Gables FL 33146
Date: 12-22-17

### ADDITIONAL WORK AUTHORIZATION REQUEST

#### "CABANA BATHROOM REMODELING"

Architect fee to revise plan and permit

Pool Bath work to be as approved plan:

-Partial demolition of bathroom

-Relocate plumbing lines

-Install new lavatory

-New wall to family room

-Complete job

Change order #1

-2-

-Install larger island in kitchen

TOTAL COST.....\$9,340.00 including architect fee  
      \$1,868.00 courtesy discount  
**TOTAL JOB.....\$7,472.00**

When sign for work.....\$3,736.00

When job is finish.....\$3,736.00

Please make check payable to Sad Remodeling & Custom Home Builders Inc. for \$3,736.00

---

It is further understood and agreed that all terms and conditions of said Contract, as it may heretofore have been modified shall be and remain the same

---

**ACCEPTED: SAAD REMODELING & CUSTOM HOMES BUILDERS, INC**

**ACCEPTED: Miguel A. Moreno or Glenda Mass**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

DATE \_\_\_\_\_

DATE \_\_\_\_\_



**CHANGE ORDER # 2**

Owner's Name: <b>Miguel Moreno &amp; Glenda Masis</b>
Job Name: Moreno residence
Job's Address: 440 Sansovino Avenue, Coral Gables FL 33146
Date: 12-22-17

**ADDITIONAL WORK AUTHORIZATION REQUEST**

**"ROOF HOOD FOR KITCHEN"**

- Revise approved plan in City
- Architect additional fee
- All carpentry work
- Brake roof for exhaust pipe
- Electrical work (hood by home owner)
- Finish work in new area
- Cabinet maker additional work for hood

**TOTAL JOB COST.....\$2,274.00**

**COURTESY DISCOUNT...\$1,137.00**

**COST.....\$ 1,137.00**

---

It is further understood and agreed that all terms and conditions of said Contract, as it may heretofore have been modified shall be and remain the same

---

**ACCEPTED: SAAD REMODELING & CUSTOM HOMES BUILDERS, INC**

**ACCEPTED: Miguel A. Moreno or Glenda Mass**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

DATE \_\_\_\_\_

DATE \_\_\_\_\_



*18191 NW 68 Ave, Ste #104  
Miami Lake, FL 33015*

## ***SCOPE OF WORK***

***Mr. MorenoMartin  
and  
Mrs. Masis Chacon***

***Residence  
440 Sansovino Ave  
Coral Gables, FL 33146***

*AS*

*Q.M.*

## *New Tile Living Areas Features*

- *Demolition existing marble*
- *Haul away debris*
- *Prepare floor's for new porcelain tile apply hydraulic cement at all crack's*
- *Level all areas of the floor where needed for an even finish*
- *Install 24 x 24 imported rectified porcelain*
- *Install new 6" baseboard*
- *Install door trim's – casing to match \**

## Master Bathroom

- *Multiple Shower Jets or Oversize Ceiling Shower Head by Kohler:  
Model Purist Luxury Single Showering System or equal*
- *Luxurious Wall Niches and Ceiling Trays to be designed & approved by H.O*
- *Two Luxurious Lavatory Kohler: Model Vintage Under Mount or equal  
Faucet Model Loure or equal*
- *One Piece Toilet Kohler: Model San Raphael*
- *Porcelain / Glass Mosaic Shower Tile on floor and Shower Wall  
Porcelain / Glass Mosaic on walls and floors or Travertine Marble  
Choice of colors*
- *Designer Luxurious Faucets as shown or equal as cadet picture as Saud  
office*
- *Roman Shower*
- *Marble Floor and Shower Area Wall*

*Remove Toilet wall  
Build new Toilet Room*



## Custom Luxurious Kitchen Features

- Custom Design Kitchen Cabinets, Solid Wood Doors and Drawers With Profiles to be selected, all cabinets, structure will be done with finish ply, ( no particle board) high quality hinges and bearing suspension for drawers. Colors to be selected by homeowner. (Design to be as pictures or equal)
- Choice of wine rack location
- Kitchen vents duct system work for High performance exhaust system ?
- Granite or Quarts kitchen counter tops with bevel edge color and profile to be Selected by homeowner as book samples (as Saad office)
- Stainless Steel double compartment sink, American Standard, model Culinaire under mount unit or equal, see pictures.
- Stainless steel faucet, Delta with detachable sprayer and hose  
↷
- High performance garbage disposal
- Choice of several accessories such as Lazy Susan, Pantry dividers, Silverware Tray and more
- \* Relocate Island Area
- \* Remove Ceiling Beam

Initial Deposit.

**MIGUEL ANGEL MORENO MARTIN**  
**GLENDIA MAGALLY MASIS CHACON**  
440 SANSOVINO AVE  
CORAL GABLES FL 33146

306  
63-915/680  
100

Date 10/25/17

Pay to the Order of Saad Remodeling Custom Home Builders Inc \$ 21 000<sup>00</sup>  
Twenty one thousand Dollars

**TOTALBANK**  
totalbank.com

For home remodeling

Signature: \_\_\_\_\_

⑆066009155⑆

CK #:306 for \$21,000.00 on 10/27/2017

>267089712<  
FirstBank FL #012  
2017-10-26  
0012587727  
Batch 122628571

X  
F  
E  
I  
E

— PAY TO THE ORDER OF —  
FIRST BANK FLORIDA  
CORAL GABLES, FL 33134-3323  
267089712  
FOR DEPOSIT ONLY  
SAAD REMODELING & CUSTOM  
HOME BUILDERS, INC.  
0014016443

DO NOT WRITE ANYTHING BELOW THIS LINE

CK #:306 for \$21,000.00 on 10/27/2017

Draw 2

MIGUEL ANGEL MORENO MARTIN  
GLENDA MAGALLY MASIS CHACON  
440 SANSOVINO AVE  
CORAL GABLES FL 33146

287  
63-915/880  
100

12/12/2017  
Date

Pay to the Order of Sand Remodeling Custom Home Builders Inc \$ 7350  
Seven thousand three hundred fifty Dollars

**TOTALBANK**  
totalbank.com

For Home Remodeling

⑆066009155⑆

Marked Check

CK #:287 for \$7,350.00 on 12/13/2017

>267089712<  
FirstBank FL #012  
2017-12-12  
0012230592  
Batch 127343960

0014016443

*Grade Remodeling*

10 - Be Definit

1. FIRST BANK FLORIDA  
2. DEPOSIT TO THE ACCOUNT OF THE WITHIN NAMED PAYEE - E FFL  
3. DELON T. LINE

CK #:287 for \$7,350.00 on 12/13/2017

4/26/2018

*Draw 3*

International Personal CHKG \*5706 — Check #308

MIGUEL ANGEL MORENO MARTIN  
GLENDA MAGALLY MASIS CHACON  
440 SANSOVINO AVE  
CORAL GABLES FL 33148

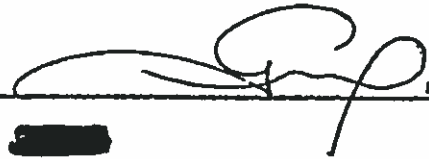
308  
63-815-680  
100

*12/21/17*  
Date

Pay to the Order of *Saad Remodeling Custom Home Builders Inc* | \$ *7350* -  
*Seven thousand three hundred fifty* Dollars

**TOTALBANK**  
totalbank.com

For *Home remodeling*



⑆066009155⑆

>267089712<  
FirstBank FL #012  
2017-12-20  
0012676670  
Batch 128226271

ENCLOSURE  
*To Be Deposited*  
*0014016443*  
*Saad Remodeling*

0

4/26/2018

Change of order #1

International Personal CHKG \*5706 — Check #309

MIGUEL ANGEL MORENO MARTIN  
GLENDA MAGALLY MASIS CHACON  
440 SANOVINO AVE  
CORAL GABLES FL 33148

309

63-915/660  
100

12/28/17  
Date

Pay to the  
Order of

Saad Remodeling Custom Home Builders Inc 3736

Three thousand seven hundred thirty six Dollars



**TALBANK**  
totalbank.com

For Bathroom

⑆066009⑆55⑆


>267089712<  
FirstBank FL #010  
2017-12-28  
0010027546  
Batch 128983239

CHECK  
SAAD REMODELING & CUSTOM, J, IT  
CORAL GABLES, FL 33134-3323  
FOR DEPOSIT ONLY  
FIRST BANK FLORIDA  
CORAL GABLES, FL 33134-3323  
267089712

ENCLOSURE



Draw 4

<b>MIGUEL ANGEL MORENO MARTIN</b> 440 SANSOVINO AVE CORAL GABLES, FL 33146		203 63-915660 040
		1/12/2018 date
Pay to the Order of	SAAD REMODELING & CUSTOM HOMES BUILDERS INC	\$ 7350
SEVEN THOUSAND THREE HUNDRED AND FIFTY	Dollars	<input type="checkbox"/> Security Features Extra Fee
<b>TOTALBANK</b>	HE Line of Credit Minimum \$250.00	
For SAAD		
⑆066009155⑆ [REDACTED]		

X

PAY TO THE ORDER OF  
FIRST BANK FLORIDA  
CORAL GABLES, FL 33134-3323

267089712  
FOR DEPOSIT ONLY  
SAAD REMODELING & CUSTOM  
HOME BUILDERS, INC. D/B/A S.I.T  
0014016743

>267089712<  
FirstBank FL #012  
2018-01-12  
0012815312  
Batch 130514193

W IS C  
F. 2/1/18

Jc no. cash :

at  
knt  
nc t n





Draw 8

<b>MIGUEL ANGEL MORENO MARTIN</b> 440 SANSOVINO AVE CORAL GABLES, FL 33148		204 63-915/660 040
		3/29/2018 date
Pay to the Order of	SAAD REUODECING	\$ 4.900
FOUR THOUSAND NINE HUNDRED		Dollars
<b>TOTALBANK</b>		HE Line of Credit Minimum \$250.00
For REUODECING		<i>[Signature]</i>
⑆066009155⑆		

ENCLOSURE HERE

X

TO Deposit

SARD Remittance

#1 #016993

CHECK HERE IF MOBILE DEPOSIT

DO NOT WRITE, STAMP OR SIGN BELOW THE LINE

>267089712<  
FirstBank FL #001  
2018-03-21  
0001630306  
Batch 137253821

0001630306

Form with various fields and lines, including a large empty space for a signature or stamp.



STATE WIDE GENERAL CONTRACTOR  
BUILDERS OF QUALITY CUSTOM HOMES  
ADDITIONS & REMODELING SERVICES



ANGEL SAAD  
PH: 305-829-3031  
FAX: 305-507-8833

18191 NW 68 AVE. STE #104  
MIAMI LAKES, FL 33015  
EMAIL: SAADREMODELING@GMAIL.COM  
WWW.SAADREMODELING.COM  
CGC1506816

CITY'S

EXHIBIT 2



Eng On

Home

8:52:09 AM 5/7/2018

- Search for a Licensee
- Apply for a License
- View Application Status
- Find Exam Information
- File a Complaint
- AB&T Delinquent
- Invoice & Activity
- List Search

Data Contained In Search Results Is Current As Of 05/07/2018 08:27 AM.

**Search Results**

Please see our [glossary of terms](#) for an explanation of the license status shown in these search results.

For additional information, including any complaints or discipline, click on the name.

License Type	Name	Name Type	License Number/Rank	Status/Expires
Certified General Contractor	<a href="#">SAAD REMODELING &amp; CUSTOM HOME BUILDERS, INC.</a>	DBA	CGC1506816 Cert General	Current, Active 08/31/2018
Main Address*: 9901 SW 62ND STREET MIAMI, FL 33173				
Construction Business Information	<a href="#">SAAD REMODELING &amp; CUSTOM HOME BUILDERS, INC.</a>	Primary	Business Info	Current
Main Address*: 5190 NW 167TH STREET UNIT 105 MIAMI, FL 33014				

[Back](#) [New Search](#)

\* denotes  
 Main Address - This address is the Primary Address on file.  
 Mailing Address - This is the address where the mail associated with a particular license will be sent (if different from the Main or License Location addresses).  
 License Location Address - This is the address where the place of business is physically located.

- Search for a Licensee
- Apply for a License
- View Application Status
- Find Exam Information
- File a Complaint
- AB&T Delinquent
- Invoice & Activity
- List Search

## Licensee Details

### Licensee Information

**Name:** DE OROZCO, GABRIEL J (Primary Name)  
**SAAD REMODELING & CUSTOM HOME BUILDERS, INC. (DBA Name)**

**Main Address:** 9901 SW 62ND STREET  
 MIAMI Florida 33173

**County:** DADE

**License Mailing:**

**LicenseLocation:**

### License Information

**License Type:** Certified General Contractor

**Rank:** Cert General

**License Number:** CGC1506816

**Status:** Current,Active

**Licensure Date:** 09/11/1998

**Expires:** 08/31/2018

### Special Qualifications

### Qualification Effective

**Construction Business** 11/26/2012

### Alternate Names

[View Related License Information](#)

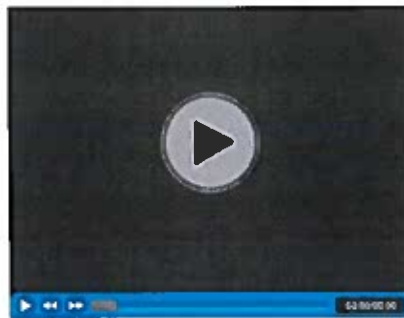
[View License Complaint](#)



- [Home](#)
- [Remodeling](#)
- [Custom Homes](#)
- [About Us](#)
- [Our Work](#)
- [Contact](#)

Watch this video to find out how →

Saad Remodeling & Custom Home Builders is a prestigious builder known for producing an enjoyable process to create your dream home. By limiting project to builder ratio, we are able to dedicate more quality time with each customer, walking them through what can be a very stressful and complicated process. Our customer communication is not the only thing that sets us apart. We have a combined experience of 35 years of custom home building which yields a very high level of construction expertise. We want to build our brand of quality (not quantity) and deliver a spectacular product.



About Saad Group



Posted on January For over 35 years award-winning Broward & Miami-Dade County general contractors Saad Group has been building, remodeling luxury homes and estates in Ft. Lauderdale, Hallandale, Southwest Ranches, Sunnyside, Miami Beach, Coconut Grove, Coral Gables, Pinecrest. From concept to completion Saad offers unparalleled service for clients who seek the utmost in customer care and quality.



Broward & Miami-Dade County General Contractors

remodeling  
learn more...

custom homes  
learn more...



Saad Group was founded in 1980, has always been committed to providing a service with the highest standards of quality. Whether your project is large or small, we are building professionals, we have experts in each task. To Saad Remodeling, the customer is the most important part of our infrastructure, therefore deserves all the attention. We are committed to your satisfaction.

We know that your investing requires comprehensive solutions, that is why we provide optimal and safe results that meet your needs by using the latest tools and construction techniques, giving you the confidence of safe investment. The building is only part of a larger project, in addition, Saad Group is committed to providing proactive advice and efficient to achieve the consolidation and overall integrity of your project.

Proud Members of



**Home Remodeling**

- Bathroom Remodeling
- Kitchen Remodeling
- Home Addition
- Home Renovation
- Home Remodeling

**Custom Homes**

- Custom Home Design
- Custom Home Construction
- Land Acquisition
- Interior Design
- Financing

**Our Address**

18191 NW68 AVE Ste# 104  
 Miami Lakes FL 33015  
 Phone 305 829 3031  
 Fax 305 507 8833  
 Email [info@saadremodeling.com](mailto:info@saadremodeling.com)  
 Website [www.saadremodeling.com](http://www.saadremodeling.com)



Since 1980 Saad Group has been remodeling designing building quality custom homes for those who demand nothing less than perfection



- [Home](#)
- [About](#)
- [Home Remodeling](#)
- [Contact](#)

© 2018 - SAAD REMODELING & CUSTOM HOME BUILDER



- [Home](#)
- [Remodeling](#)
- [Custom Homes](#)
- [About Us](#)
- [Our Work](#)
- [Contact](#)



## Meet the Team

Since 1980 Saad Group has been remodeling, designing, building quality custom homes for those who demand nothing less than perfection. This ongoing commitment has kept us among the most trusted and respected home builders in the area. As partners we oversee a talented and friendly team of craftsmen and building partners who work together to build your home or remodeling project above and beyond our high standards of quality.



### Abraham Saad *President*

Abraham has over 21 years of experience in residential and commercial construction. He has built over 100 homes in Miami-Dade and Broward counties and has renovated condominiums, offices and retail space.



### Angel Saad *General Manager*

Angel has 33 years of experience in residential and commercial construction. During this time, he has built over 200 luxury custom homes in Miami-Dade and Broward counties, from Gables by the Sea in the south to Eagle Trace in the north. He has also built multi-family communities such as Country Club Gardens (64-unit townhome community), shopping centers such as the Calle Ocho Marketplace (35,000 sq ft retail center) and retail spaces.

## Submenu

- [About Us](#)
- [Our Philosophy](#)
- [Meet the Team](#)



## Home Remodeling

- [Bathroom Remodeling](#)
- [Kitchen Remodeling](#)
- [Home Addition](#)
- [Home Renovation](#)
- [Home Remodeling](#)

## Custom Homes

- [Custom Home Design](#)
- [Custom Home Construction](#)
- [Land Acquisition](#)
- [Interior Design](#)
- [Financing](#)

## Our Address

18191 NW68 AVE Ste#104  
Miami Lakes FL 33015  
**Phone** 305 829 3031  
**Fax** 305 507 8833  
**Email** [info@saadremodeling.com](mailto:info@saadremodeling.com)  
**Website** [www.saadremodeling.com](http://www.saadremodeling.com)



Since 1980 Saad Group has been remodeling, designing, building quality custom homes for those who demand nothing less than perfection.



- [Home](#)
- [About](#)
- [Home Remodeling](#)
- [Contact](#)

© 2018 - SAAD REMODELING & CUSTOM HOME BUILDER





**Get in Touch with Us!**

We would love to hear from you. One of our representatives will contact you as soon as possible. We are glad to be of service to you.

**Name**

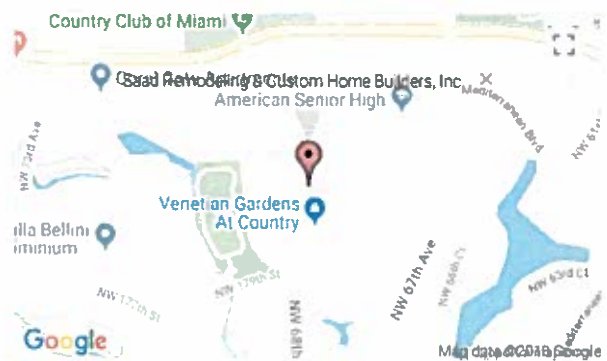
**Your Telephone**

**Your E-mail**

**Your Message**

SEND

**Our Offices**



18191 NW 68 AVE Ste#104  
 Miami Lakes FL 33015

Phone 305-829-3031  
 Phone 305-507-8833

Email [info@saadremodeling.com](mailto:info@saadremodeling.com)  
 Website <http://www.saadremodeling.com>

**Home Remodeling**

- Bathroom Remodeling
- Kitchen Remodeling
- Home Addition
- Home Renovation
- Home Remodeling

**Custom Homes**

- Custom Home Design
- Custom Home Construction
- Land Acquisition
- Interior Design
- Financing

**Our Address**

18191 NW68 AVE Ste#104  
 Miami Lakes FL 33015

Phone 305 829 3031  
 Fax 305 507 8833  
 Email [info@saadremodeling.com](mailto:info@saadremodeling.com)  
 Website [www.saadremodeling.com](http://www.saadremodeling.com)



Since 1980 Saad Group has been remodeling, designing, building quality custom homes for those who demand nothing less than perfection.





Department of State / Division of Corporations / Search Records / Detail By Document Number /

**Detail by Entity Name**

Florida Profit Corporation  
SAAD REMODELING & CUSTOM HOME BUILDERS, INC.

Filing Information

**Document Number** P11000108375  
**FEI/EIN Number** 45-4933604  
**Date Filed** 12/27/2011  
**State** FL  
**Status** ACTIVE  
**Last Event** REINSTATEMENT  
**Event Date Filed** 10/04/2012

Principal Address

18191 NW 68 AVE  
Suite # 104  
MIAMI, FL 33015

Changed 04/29/2014

Mailing Address

18191 NW 68 AVE  
SUITE #104  
MIAMI, FL 33015

Changed 04/29/2014

Registered Agent Name & Address

SAAD, MERY  
18191 NW 68 AVE  
SUITE #104  
MIAMI, FL 33015

Address Changed 04/29/2014

Officer/Director Detail

**Name & Address**

Title President

SAAD, MERY  
18191 NW 68 AVE  
Suite # 104  
MIAMI, FL 33015

Title VP

Saad, Angel  
 18191 NW 68 AVE  
 Suite # 104  
 MIAMI, FL 33015

**Annual Reports**

Report Year	Filed Date
2016	04/29/2016
2017	04/27/2017
2018	04/24/2018

**Document Images**

<a href="#">04/24/2018 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/27/2017 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/29/2016 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/28/2015 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/29/2014 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/30/2013 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">10/04/2012 -- REINSTATEMENT</a>	<a href="#">View image in PDF format</a>
<a href="#">12/27/2011 -- Domestic Profit</a>	<a href="#">View image in PDF format</a>

http://search.sunbiz.org/Inquiry/CorporationSearch/SearchResultDetail?inquirytype=Entity...

Development Services Department  
405 Biltmore Way, 3<sup>rd</sup> Floor  
Coral Gables, Florida 33134



Tel: 305-460-5235  
Fax: 305-460-5261  
www.coralgables.com  
applications@coralgables.com

**BL-17-12-1814**



1 PAGE

**ALL OF THE FOLLOWING MUST BE COMPLETED BY APPLICANT ACCORDING TO FS 713.135**

Date:	Permit Type: <input checked="" type="checkbox"/>	Master Permit #
Permit Change: <input checked="" type="checkbox"/>	Building <input checked="" type="checkbox"/>	Sub Permit #: <b>BL17121814</b>
Change of Contractor <input type="checkbox"/>	Electrical <input type="checkbox"/>	Project Information: <input checked="" type="checkbox"/>
Permit Extension <input type="checkbox"/>	Mechanical <input type="checkbox"/>	Commercial: <input type="checkbox"/> Residential: <input checked="" type="checkbox"/>
Permit Renewal <input type="checkbox"/>	Plumbing <input type="checkbox"/>	Linear Feet: <input checked="" type="checkbox"/>
Permit Revision <input type="checkbox"/>	Misc. <input type="checkbox"/>	Square Feet: <u>≥ 300 s.f.</u> <input checked="" type="checkbox"/>
Permit Supplement <input type="checkbox"/>	App. _____ Date: _____	Cost of Work: \$ <u>17,000.00</u> <input checked="" type="checkbox"/>

**DESCRIPTION OF WORK (PRINT):**  
Replace existing kitchen remodeling existing master bath.

**Job Address:**  
440 Sansovino Ave  
Folio #: 03-4120-023-3130  
Lot: 4 & 5 Block: 101  
Subdivision: Coral Gables Riviera sec 2 REV  
Plat book: 28-18 Page: \_\_\_\_\_

**PROPERTY OWNER:**  
Name: Miguel Angel Moreno Marlin and Glenda Magaly Masis Chacon  
Address: 440 Sansovino Ave  
City/State/Zip: Coral Gables FL 33146  
Telephone No.: \_\_\_\_\_  
Email: \_\_\_\_\_

**CONTRACTOR COMPANY NAME:** Saad Remodeling and Custom Home Builder's  
Qualifier Name: Gabriel de Orozco  
Address: 18191 NW 68 Ave  
City/State/Zip: Hialeah, FL 33015  
License No.: CC1506816 Telephone No.: 3058293031  
Email: saadremodeling@gmail.com

**ARCHITECT:**  
Name: Carlos A Marti  
Address: 13600 SW 32 St Miami, FL 33175

**ENGINEER:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

**BONDING:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

**MORTGAGE LENDER:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES BOILERS, HEATERS TANKS, AND AIR CONDITIONERS, etc. AFFIDAVIT OF OWNER/LESSEE/AUTHORIZED AGENT: Under penalties of perjury and the City of Coral Gables False Claims and Presentations Ordinance, City Code Chapter 39, I certify that I am the owner or that I have the owner's full consent and authorization to sign this application to obtain a permit to perform the above-mentioned work; that all the foregoing information is accurate; and that all work will be done in compliance with all applicable laws regulating construction and zoning. **WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.** The Historical Resources & Cultural Arts Department's approval is required prior to the issuance of a demolition permit. The Qualifier cannot sign below as Owner/Lessee/Authorized Agent.

Signature of Owner/Lessee/Authorized Agent: \_\_\_\_\_

Signature of Qualifier: Gabriel de Orozco

Owner/Lessee/Authorized Agent Name (Print): Miguel A. Moreno

Qualifier Name (Print): Gabriel de Orozco

STATE OF FLORIDA  
SS  
COUNTY OF MIAMI-DADE )  
Notary Public: Angel Saad  
MY COMMISSION # FF 163932  
EXPIRES: December 16, 2017  
Bonded Thru Budget Notary Services  
Sworn to or affirmed and subscribed before me this 15 day of Dec in the year 2017 by \_\_\_\_\_ who has taken an oath and is personally known to me or has produced \_\_\_\_\_ as identification.  
My Commission Expires: \_\_\_\_\_  
Notary Public

STATE OF FLORIDA  
SS  
COUNTY OF MIAMI-DADE )  
Notary Public: Angel Saad  
MY COMMISSION # FF 163932  
EXPIRES: December 16, 2017  
Bonded Thru Budget Notary Services  
Sworn to or affirmed and subscribed before me this 15 day of Dec in the year 2017 by \_\_\_\_\_ who has taken an oath and is personally known to me or has produced \_\_\_\_\_ as identification.  
My Commission Expires: \_\_\_\_\_  
Notary Public

**CITY'S**

Form 101 W/18/2017

**EXHIBIT**

3



CFN 2018R0097714  
 OR BK 30866 Pg 4051 (1Pgs)  
 RECORDED 02/15/2018 13:27:56  
 HARVEY RUVIN, CLERK OF COURT  
 MIAMI-DADE COUNTY, FLORIDA

# NOTICE OF COMMENCEMENT

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION  
 PERMIT NO. BL-17-12-1814 TAX FOLIO NO. 03-4120-023-3130

STATE OF FLORIDA  
 COUNTY OF DADE

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement:

1. Legal description of property and street address: 440 Sansovino Ave Coral Gables, FL 33146, Coral Gables Riviera Sec 2 REV PB 28-18 Lots 4 & 5 BLK 101

2. Description of improvement: Remodeling of kitchen and bath

3. Owner (s) name and address: Miguel Angel Moreno Masis and Glenda Magally Masis Chacon  
440 Sansovino Ave Coral Gables, FL 33146

Interest in property: \_\_\_\_\_

Name and address of fee simple titleholder: \_\_\_\_\_

4. Contractor's name and address: Saad Remodeling and Custom Home Builders, Inc.  
18191 NW 68 Ave Suite 104 Hialeah, FL 33015

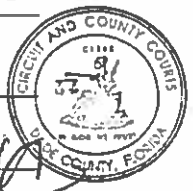
**GIRLYNE PIERRE-THEOC #201673**

5. Surety: (Payment bond required by owner from contractor.) STATE OF FLORIDA, COUNTY OF DADE  
 I HEREBY CERTIFY that the foregoing is a true and correct copy of the original on file in this office. FEB 16 2018

Name and address: \_\_\_\_\_

Amount of bond: \$ \_\_\_\_\_

HARVEY RUVIN, Clerk of Circuit and County Courts  
Deputy Clerk



6. Lender's name and address: \_\_\_\_\_

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes: \_\_\_\_\_

Name and address: \_\_\_\_\_

8. In addition to himself, Owner designates the following person (s) to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b) 7., Florida Statutes: \_\_\_\_\_

Name and address: \_\_\_\_\_

9. Expiration date of this Notice of Commencement: ANGEL SAAD expiration date is 1 year from the date of recording unless a different date is specified

Signature of Owner: \_\_\_\_\_

**ANGEL SAAD**  
 Commission # GG 165268  
 Expires December 16, 2021  
 Bonded thru Budget Notary Services



**ANGEL SAAD**  
 Commission # GG 165268  
 Expires December 16, 2021  
 Bonded thru Budget Notary Services

STATE OF FLORIDA  
 SS  
 COUNTY OF MIAMI-DADE  
 Sworn to or affirmed and subscribed before me this 16 day of Feb the year 2018  
 by Angel Saad who has taken an oath and is personally known to me or has produced \_\_\_\_\_ as identification.  
 My Commission Expires December 16, 2021  
 Notary Public Angel Saad

Prepared by: Angel Saad

Address: 18191 NW 68 Ave  
Hialeah Fla 33015

Permits

File Edit Record Navigate Form Reports Format Tab Help



Main Contractors Custom Fields Fees Plan Routing Actions Fee Summary Sub Permits Routing History Parcels Routing Status

Tab Groups  
Toolbox

Permit type:  INTERIOR ALTERATION ONLY Permit #:   
Address:  Parcel #:   
Apt/Suite:   
City:  State:  Zip:

Permit Information  
Master permit:  Routing queue:  Applied:   
Project:  Status:  Approved:   
Description:  Issued:   
Submitted:  Clock:  Days:  Expires:   
Submitted via:

Owner  
Last name:  First name:   
Phone:  Email:  Address:

Applicant  
 Owner is applicant?  Contractor is applicant?  
Last name:  First name:   
Phone:  Cust #:  Address:   
Email:   Email inspection results

Lender  
Last name:  First name:   
Phone:  Email:  Address:





Tab Groups  
Toolbox

Permit #  Address   
Permit type

Contractors Name / Address

SAAD REMODELING & CUSTOM HOME BUI...	Address	<input type="text" value="9901 SW 62ND ST&lt;br/&gt;MEDLEY FL 33178"/>	<input checked="" type="checkbox"/> Primary		
Phone	<input type="text" value="(305) 829-3031"/>	Bus license #	<input type="text" value="CGC1506816"/>	<input checked="" type="checkbox"/> Contractor is applicant	
License type	<input type="text"/>	License #	<input type="text"/>	License status	<input type="text"/>
Contact	<input type="text" value="GABRIEL DE OROZCO"/>	Phone	<input type="text" value="(305) 829-3031"/>	Web site	<input type="text"/>
Contact email	<input type="text" value="SAADREMODELING@GMAIL.COM"/>	Fax	<input type="text" value="( ) -"/>		
<input type="checkbox"/> Mail hard copy		<input type="checkbox"/> Send email		<input type="checkbox"/> Send fax	

Permits

File Edit Record Navigate Form Reports Format Tab Help

Navigation icons: Home, Back, Forward, Stop, Refresh, Print, Copy, Paste, Undo, Redo, Zoom, Jump 1, Help, Info.

Main | Contractors | Custom Fields | Fees | Plan Routing | **Actions** | Fee Summary | Sub Permits | Routing History | Parcels | Routing Status

Tab Groups  
Toolbox

Permit #  Address   
 Permit type

Group	Action Code	Action Description	Completion Date	Complete Code
1	PLAN REVIEW	Routed		
2	PLAN PROCESSING	Routed		
3	CASHIER	Routed		
4	NOTICE OF COMMENCEMENT	Routed		
-	5	INSPECTION	Working	
5	certificat	CERT OF COMPLETION OR OCCUPANCY IS		<input type="checkbox"/>
5	b1078	COURTESY INSPECTION - STRUCTURAL	04/25/2018 12:00:00 AM	<input checked="" type="checkbox"/> comp
5	b1084	FINAL STRUCTURAL		<input type="checkbox"/>
5	zn004	FINAL ZONING		<input type="checkbox"/>
5	b1114	FRAMING 01 FLOOR		<input type="checkbox"/>
5	b1171	INSULATION 01 FLOOR		<input type="checkbox"/>
5	b1245	SCREW FOR GYPSUM BOARD 01 FLOOR		<input type="checkbox"/>



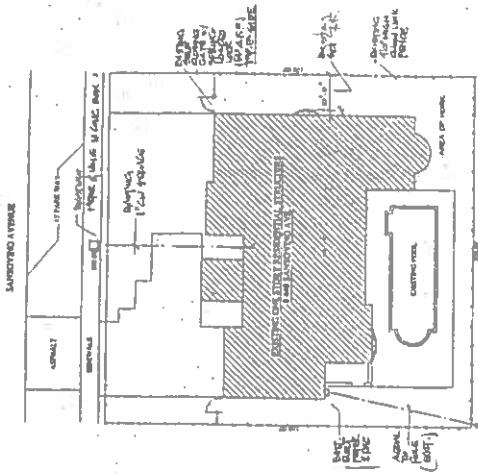
RESIDENCE ALTERATION FOR  
 MIGUEL A. WERNER & LINDA M. MASIS  
 440 Sansovino Avenue, Coral Gables, Florida



DATE: 11/27/17  
 DRAWN BY: [Signature]  
 CHECKED BY: [Signature]



DATE: 11/27/17  
 DRAWN BY: [Signature]  
 CHECKED BY: [Signature]



**SITE PLAN**  
 SCALE: 1/16" = 1'-0"

**LEGAL DESCRIPTION**

LOT 101, 102 AND 103, TRACT 1, 100 ACRES, MORE OR LESS, COUSSEMAURE SUBDIVISION, SECTION 16, T. 27 N., R. 25 W., CO. OF DADE, FLA. PUBLIC RECORDS OF DADE COUNTY, V. 10000, P. 10000

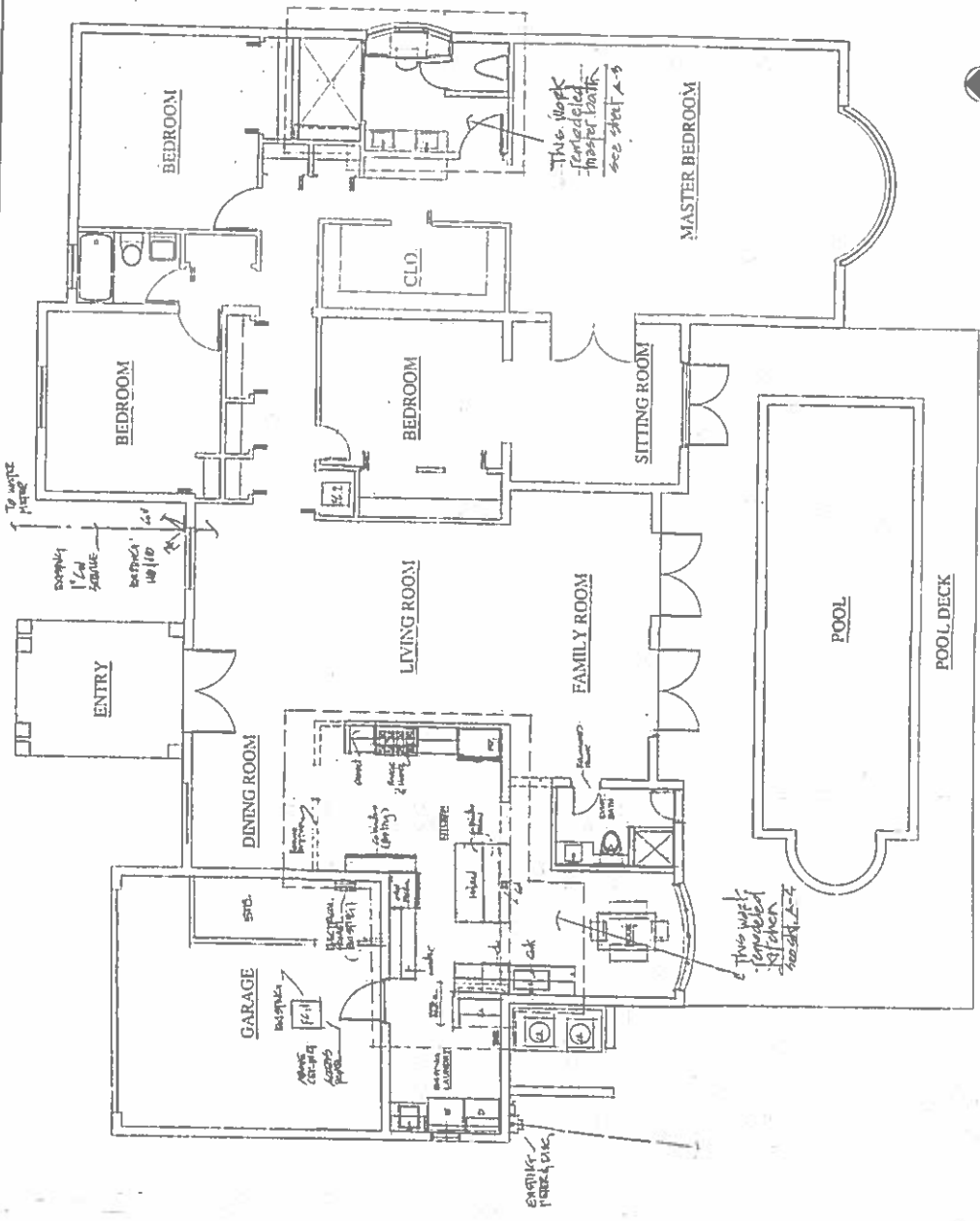
SANSOVINO AVENUE

2	3	4	5	6
1	(101)	26	25	24
28	27	26	25	24
27				23

MAGGIONE STREET

**LOCATION SKETCH**

- SCOPE OF THIS WORK  
 1- REMODELED MASTER BATH - SHEET A-3  
 2- REMODELED KITCHEN - SHEET A-4
- GENERAL NOTES:  
 NO EXTERIOR WORK THIS PERMIT  
 NO INCREASE OF AREA THIS PERMIT  
 NO CHANGES TO EXISTING PARKING OR DRIVES  
 NO CHANGE IN LOT COVERAGE OR SET BACKS.



**FLOOR PLAN - EXISTING HOUSE - ALTERATION**  
 SCALE: 1/4" = 1'-0"

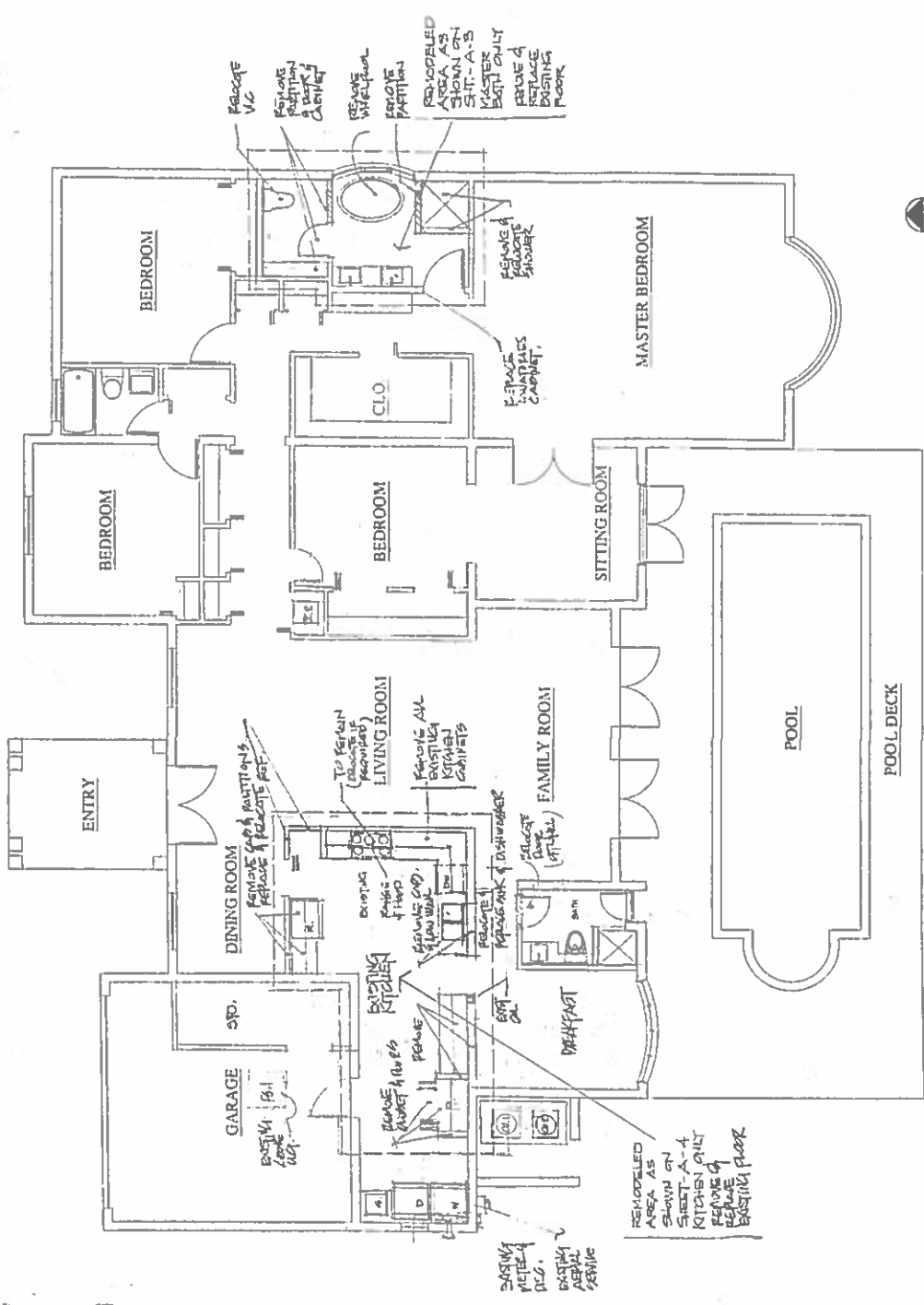
RESIDENCE ALTERATION FOR  
Mr. Luis A. & Mrs. Odaline P. Perez Mena  
440 Sandoval Avenue, Coral Gables, Florida



DATE: 11/29/04  
DRAWN BY: [Name]  
CHECKED BY: [Name]  
SCALE: 1/4" = 1'-0"  
PROJECT NO. [Number]  
DATE: 5/19/04  
PROJECT: [Name]  
ADDRESS: [Address]

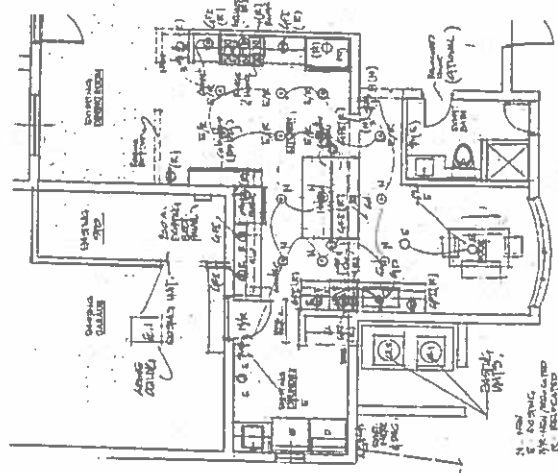
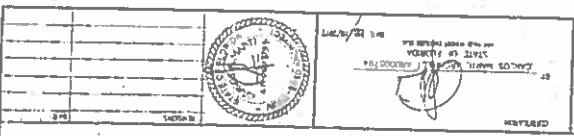


Table with 4 columns: NO., DATE, DESCRIPTION, and SIGNATURE. The table contains several rows of project-related information.

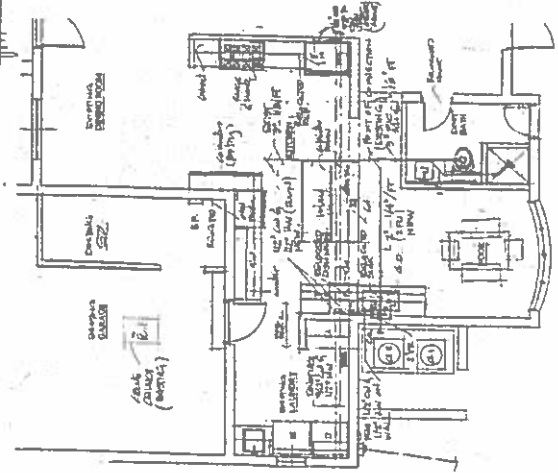


FLOOR PLAN EXISTING HOUSE • FOR REFERENCE ONLY / DEMOLITION  
SCALE: 1/4" = 1'-0"



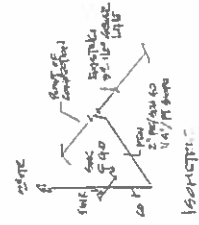


ELECTRICAL WORK OF CORRAL CABLES  
 Electrical Engineering Department



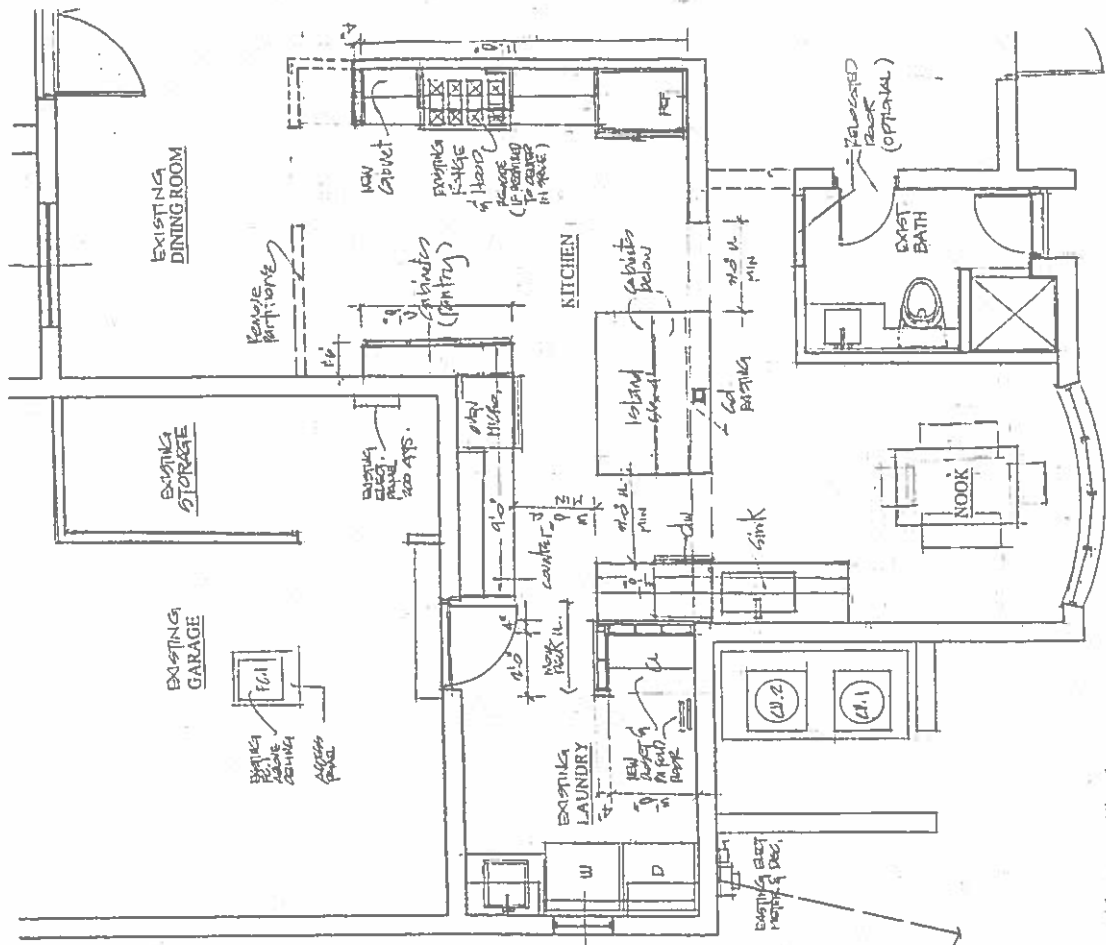
PLUMBING WORK

**REMODELLED**  
 ELECTRICAL WORK  
 NO ADDITIONAL ELECTRICAL LOADS DUE TO THIS WORK. NO CHANGE TO EXISTING BREAKERS AND CIRCUITS. ALL NEW WIRING TO BE INSTALLED IN CONFORMANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND ALL APPLICABLE LOCAL CODES. ALL NEW WIRING TO BE INSTALLED IN CONFORMANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND ALL APPLICABLE LOCAL CODES. ALL NEW WIRING TO BE INSTALLED IN CONFORMANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND ALL APPLICABLE LOCAL CODES.



**PLUMBING WORK**  
 REPLACE EXISTING SINK & DISHWASHER WITH NEW SINK & DISHWASHER. ALL NEW WIRING TO BE INSTALLED IN CONFORMANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND ALL APPLICABLE LOCAL CODES. ALL NEW WIRING TO BE INSTALLED IN CONFORMANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND ALL APPLICABLE LOCAL CODES.

**NOTE:** APPROXIMATE SINK POSITION. SEE PLAN FOR EXACT LOCATION. IF REQUIRED, SEE ARCHITECT FOR DETAILS.



KITCHEN PLAN - REMODELED

SCALE: 1/2" = 1'-0"

- SCOPE OF WORK**
- REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.
  - REMOVE EXISTING SINK & DISHWASHER AS SHOWN ON EXISTING PLAN.

SEE EXISTING RESIDENCE PERMITS FOR PLAN SHEET A-2.  
 ALL NEW CABINETS AS PER OWNER/CONTRACTOR AGREEMENT.

RESIDENCE ALTERATION FOR  
Mr. Luis A. & Mrs. Odina P. Perez Meria  
440 Sansovino Avenue, Coral Gables, Florida



SCALE AS SHOWN  
DATE BY  
REVISION

OPERATION  
BY  
DATE  
STATE OF FLORIDA  
REGISTERED ARCHITECT

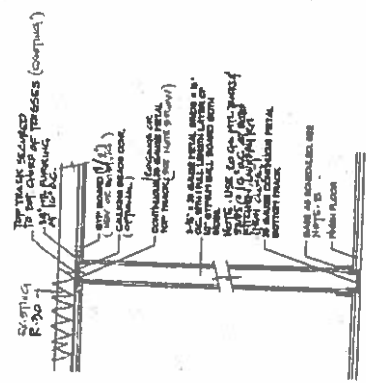


Table with columns for REVISION, DATE, and DESCRIPTION.

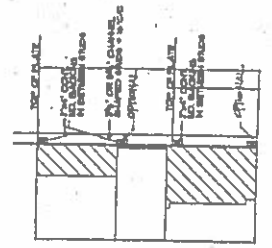
NON-BRANDED RED BELLS ONLY.  
SPECIAL FINISHES:  
A. ALL WALLS TO BE FINISHED AS FOLLOWS:  
1. BRICK: BRICK WITH 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.  
2. CONCRETE: 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.  
3. GYP. BOARD: 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.  
B. ALL WALLS ON TRUCKS TO CONCRETE.  
C. ALL WALLS ON TRUCKS TO CONCRETE AND 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.  
D. ALL WALLS ON TRUCKS TO CONCRETE AND 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.  
E. ALL WALLS ON TRUCKS TO CONCRETE AND 1/2" PLASTER ON EXTERIOR AND 3/4" ON INTERIOR.

1. THE L.A. TIME IS BEING AND UNIFORM...  
2. DOORS AND WINDOWS AND ALL...  
3. ALL WALLS TO BE FINISHED AS...  
4. ALL WALLS TO BE FINISHED AS...  
5. ALL WALLS TO BE FINISHED AS...  
6. ALL WALLS TO BE FINISHED AS...  
7. ALL WALLS TO BE FINISHED AS...  
8. ALL WALLS TO BE FINISHED AS...  
9. ALL WALLS TO BE FINISHED AS...  
10. ALL WALLS TO BE FINISHED AS...

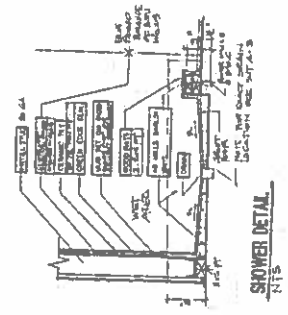
FRAME OPENED FOR WALLS, ALL  
FINISHES FINISHES SHALL BE  
MAXIMUM 2000 SMOKE DEVELOPED  
PLASTICUM 450 FPC R 302.9 E  
SHALL BE MAXIMUM 2000 SMOKE DEVELOPED  
SHALL BE MAXIMUM 2000 SMOKE DEVELOPED  
SANGLEDAD MAXX 450 FPC R 302.10



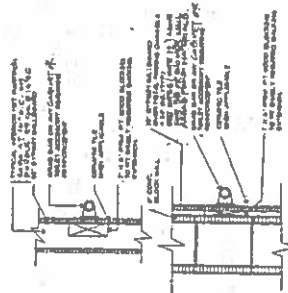
TYPICAL NON-BRICK PARTITION  
SCALE: 3/4"=1'-0"



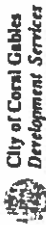
WALL HUNG CABINET  
OR PLUMBING  
FIXTURE MOUNTING  
DETAIL  
NTS



SHOWER DETAIL  
NTS



BATH ADD/BACKING DETAILS  
KITCHEN  
CABINET BACKING  
PARTITION & CASKING LAYOUTS. AEM.  
NTS



City of Coral Gables  
Development Services



BL-17-12-1814  
440 BANSOVINO AVE #

File # 00-4130-003-0130  
CITY DEVELOPMENT INTERVENTIONS  
CITY OF CORAL GABLES  
EL 1712-1854  
ME 18-01-2183

USE AND OCCUPANCY \_\_\_\_\_  
OCCUPANT LEAD \_\_\_\_\_  
BORING CODE \_\_\_\_\_  
CONSTRUCTION TYPE \_\_\_\_\_

IS ESSENTIAL \_\_\_\_\_ NON-ESSENTIAL \_\_\_\_\_  
INDICATE THE TYPE OF FLOOR JUNG AND  
PROPERTY LOWEST FLOOR ELEVATION OR  
FLOOR FINISH ELEVATION IN RELATION TO  
MEAN SEA LEVEL (MSL)

DISTRICT REQUIRED PERMITTED  
CWH \_\_\_\_\_  
SFH \_\_\_\_\_  
OTHER \_\_\_\_\_  
NEW CONSTRUCTION SUBSTANTIAL RECONSTRUCTION  
YES \_\_\_\_\_ NO \_\_\_\_\_  
VEB \_\_\_\_\_

Special Inspector required  
for the following:  
 Special Inspector for PLUMB  
 Special Inspector for REINFORCED MASONRY  
 Special Inspector for \_\_\_\_\_

BL-17-12-1814

OFFICE SET  
6 DEANWINGS

System	Approved	Date
<input checked="" type="checkbox"/> ELECTRICAL	<i>[Signature]</i>	12/14/14
<input type="checkbox"/> MECHANICAL		
<input type="checkbox"/> PLUMBING		
<input type="checkbox"/> FIRE		
<input type="checkbox"/> HANDICAP		
<input type="checkbox"/> HISTORICAL		
<input type="checkbox"/> LANGUAGE		
<input type="checkbox"/> MECHANICAL		
<input type="checkbox"/> PLUMBING		
<input type="checkbox"/> PUBLIC WORKS		
<input type="checkbox"/> STRUCTURAL		
<input type="checkbox"/> ZONING		
<input type="checkbox"/> DENVER BUILDING		



BL-17-12-1814

Inspection Schedule for JOSE PAZ  
Scheduled for 4/25/2018  
INTERIOR ALTERATION ONLY

Permit# BL-17-12-1814      Address 440 SANSOVINO AVE      Owner's Name MIGUEL ANGEL MORENO MARTIN GLE

Job Description  
INTERIOR ALTERATIONS ONLY - MASTER BATHROOM AND KITCHEN \$17,000

Contractor SAAD REMODELING & CUSTOM HOME BUILDEF      License # CGC1506816


Contact Name GABRIEL DE OROZCO      Contact Telephone Number (305) 829-3031

Master Permit#: Type: bl078      COURTESY INSPECTION - STRUCTURAL      Time: 14:31

Notes:

Contact: GLENDA  
Phone: (305) 316-8491

Comments: ① OBSERVED THAT THERE IS NO EXISTING COLUMN IN KITCHEN AREA AS NOTED ON PLAN  
② OBSERVED POOR WORKMANSHIP ON FLOOR + WALL TILING  
③ CONTRACTOR FAILED TO SCHEDULE + OBTAIN APPROVED FRAMING, INSULATION + DRYWALL SCREW INSPECTIONS (WORK CONCEALED) @ MASTER BATH

Approved  Rejected  Cancelled  PA  Re-inspection Fee  OK for TCO  Waived   
Inspector's Signature:  ID #: 6214 Scheduled Start Date: 4/25/2018  
Inspector's Name: JOSE PAZ Inspector's Telephone Number: (305) 460-5378

RV-18-02-1908



Development Services Department  
405 Biltmore Way, 3<sup>rd</sup> Floor  
Coral Gables, Florida 33134



Tel: 305-460-5235  
Fax: 305-460-5261  
www.coralgables.com  
applications@coralgables.com

**CITY OF CORAL GABLES**  
**DEVELOPMENT SERVICE DEPARTMENT**  
*Permit Application*

ALL OF THE FOLLOWING MUST BE COMPLETED BY APPLICANT ACCORDING TO FS 713.135

Date:	Permit Type: <input checked="" type="checkbox"/>	Master Permit #: <u>BL 17121814</u>
Permit Change: <input checked="" type="checkbox"/>	Building <input checked="" type="checkbox"/>	Sub Permit #:
Change of Contractor <input type="checkbox"/>	Electrical <input type="checkbox"/>	Project Information: <input checked="" type="checkbox"/>
Permit Extension <input type="checkbox"/>	Mechanical <input type="checkbox"/>	Commercial: <input type="checkbox"/> Residential: <input checked="" type="checkbox"/>
Permit Renewal <input type="checkbox"/>	Plumbing <input type="checkbox"/>	Linear Feet: <input checked="" type="checkbox"/>
Permit Revision <input type="checkbox"/>	Misc. <input type="checkbox"/>	Square Feet: <input checked="" type="checkbox"/>
Permit Supplement <input type="checkbox"/>	App. Date:	Cost of Work: <input checked="" type="checkbox"/>

<b>DESCRIPTION OF WORK (PRINT):</b>	<b>Job Address:</b>
	440 Sansovino Ave
	Folio #: 03-4120-023-3130
	Lot: 4 & 0 Block: 101
	Subdivision: Coral Gables Riviera sec 2 REV
	Plat book: 28-18 Page:

<b>PROPERTY OWNER:</b>	<b>CONTRACTOR COMPANY NAME:</b> Saad Remodeling and Custom Home Builders
Name: Miguel Angel Moreno Martin and Glenda Magally Mastis Chacon	Qualifier Name: SAAD REMODELING & CUSTOM HOME
Address: 440 Sansovino Ave	Address: 9901 SW 62ND STREET
City/State/Zip: Coral Gables FL	City/State/Zip: MEADE FL 33178
Telephone No.:	License No.: CGC1506816 Telephone No.:
Email:	Email: saadremodeling@gmail.com

<b>ARCHITECT:</b>	<b>ENGINEER:</b>
Name: Carlos A Marti	Name:
Address: 13600 SW 32 St Miami, FL 33175	Address:

<b>BONDING:</b>	<b>MORTGAGE LENDER:</b>
Name:	Name:
Address:	Address:

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES BOILERS, HEATERS TANKS, AND AIR CONDITIONERS, etc. AFFIDAVIT OF OWNER/LESSEE/AUTHORIZED AGENT: Under penalties of perjury and the City of Coral Gables False Claims and Presentations Ordinance, City Code Chapter 39, I certify that I am the owner or that I have the owner's full consent and authorization to sign this application to obtain a permit to perform the above-mentioned work; that all the foregoing information is accurate; and that all work will be done in compliance with all applicable laws regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. The Historical Resources & Cultural Arts Department's approval is required prior to the issuance of a demolition permit. The Qualifier cannot sign below as Owner/Lessee/Authorized Agent.

Signature of Owner/Lessee/Authorized Agent: \_\_\_\_\_ Signature of Qualifier: Gabriel de Orozco  
Qualifier Name (Print): Gabriel de Orozco

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )  
ANGEL SAAD  
Commission # GG 165268  
I, \_\_\_\_\_, do hereby certify that \_\_\_\_\_  
of \_\_\_\_\_, in the year 2018, by \_\_\_\_\_  
has taken an oath and is personally known to me as identification.

My Commission Expires: \_\_\_\_\_  
Notary Public

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )  
ANGEL SAAD  
Commission # GG 165268  
I, \_\_\_\_\_, do hereby certify that \_\_\_\_\_  
of \_\_\_\_\_, in the year 2018, by \_\_\_\_\_  
has taken an oath and is personally known to me as identification.

My Commission Expires: \_\_\_\_\_  
Notary Public











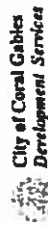
# OFFICE SET

Master Permit # BL-17-12-1814

Permits	By	Date
<input checked="" type="checkbox"/> BUILDING	<i>[Signature]</i>	2-19-18
<input type="checkbox"/> CONCRETE		
<input type="checkbox"/> ELECTRICAL		
<input type="checkbox"/> EXCAVATION		
<input type="checkbox"/> FIRE		
<input type="checkbox"/> GAS		
<input type="checkbox"/> MECHANICAL		
<input type="checkbox"/> PLUMBING		
<input type="checkbox"/> PUBLIC WORKS		
<input type="checkbox"/> SIGNAGE		
<input type="checkbox"/> SPECIAL INSPECTOR		

Subject to compliance with all Federal, State, County and City codes and regulations. The City Engineer is not responsible for any errors or omissions in this permit. THIS COPY OF PERMIT MUST BE KEPT ON SITE AT ALL TIMES AND MUST BE AVAILABLE FOR INSPECTION AT ALL TIMES.

APPROVAL OF THIS SET OF PLANS IS NOT A GUARANTEE OF THE QUALITY OF THE WORK OR THE STRUCTURE OR THE SAFETY OF THE WORK. THE CITY ENGINEER IS NOT RESPONSIBLE FOR ANY DAMAGE TO PERSONS OR PROPERTY CAUSED BY THE WORK.



City of Coral Gables  
Development Services

**RV-18-02-1908**  
440 SANSLOVING AVE #

Form #: 02-170-023-3126  
Permit Description: REVISION TO VETERINARIAN ALTERATIONS MASTER BATHROOM AND ARTICLE 1717.020

EL \_\_\_\_\_  
ME \_\_\_\_\_  
PL \_\_\_\_\_

Special Inspector required for the following:

- Special Inspector for PLUMB
- Special Inspector for REINFORCED MASONRY
- Special Inspector for \_\_\_\_\_

**RV-18-02-1908**



Permits

File Edit Record Navigate Form Reports Format Tab Help



Main | Contractors | Custom Fields | Fees | Plan Routing | Actions | Fee Summary | Sub Permits | Routing History | Parcels | Routing Status

Permit #	BL-17-12-1814	Address	440 SANSOVINO AVE CORAL GABLES FL 33146-2220
Permit type	INTERIOR ALTERATION ONLY		
Permit Number	Permit Type	Address	
EL-17-12-1854	ELEC COMMERCIAL / RESIDENTIAL	440 SANSOVINO AVE CORAL GABLES FL 33146-2220	
Status	issued		
Description	INTERIOR ALTERATIONS ONLY - MASTER BATH AND KITCHEN 15 OUTLETS, 15 LIGHTS, 5 SPECIAL		
PL-18-01-1503	PLUMB COMMERCIAL / RESIDENTIAL	440 SANSOVINO AVE CORAL GABLES FL 33146-2220	
Status	issued		
Description	PLUMBING WORK FOR RESD. INTERIOR ALTERATIONS @ MASTER BATHROOM & KITCHEN 6rs 4S		
RV-18-02-1908	REVISION TO PERMIT	440 SANSOVINO AVE CORAL GABLES FL 33146-2220	
Status	final		
Description	REVISION TO INTERIOR ALTERATIONS - MASTER BATHROOM AND KITCHEN \$17,000		
UP-17-12-1815	UPFRONT FEE	440 SANSOVINO AVE CORAL GABLES FL 33146-2220	
Status	final		
Description	*UPFRONT FEE* BL-17-12-1814 - INTERIOR ALTERATIONS ONLY - MASTER BATHROOM AND KITCHEN \$17,000		

Tab Groups

Toolbox

Development Services Department  
405 Biltmore Way, 3<sup>rd</sup> Floor  
Coral Gables, Florida 33134



Tel: 305-460-5235  
Fax: 305-460-5261  
www.coralgables.com  
applications@coralgables.com

**CITY OF CORAL GABLES**  
**DEVELOPMENT SERVICE DEPARTMENT**  
**Permit Application**

**EL-17-12-1854**

ALL OF THE FOLLOWING MUST BE COMPLETED BY APPLICANT ACCORDING TO FS 713.135

Date: <u>2/5/18</u>	Permit Type: <input checked="" type="checkbox"/> Building	Master Permit #: <u>DL-17-12-1814</u>
Permit Change: <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Electrical	Sub Permit #:
Change of Contractor: <input type="checkbox"/>	<input type="checkbox"/> Mechanical	Project Information: <input checked="" type="checkbox"/>
Permit Extension: <input type="checkbox"/>	<input type="checkbox"/> Plumbing	Commercial: <input type="checkbox"/> Residential: <input checked="" type="checkbox"/>
Permit Renewal: <input type="checkbox"/>	<input type="checkbox"/> Misc. App.	Linear Feet: <input checked="" type="checkbox"/>
Permit Revision: <input type="checkbox"/>		Square Feet: <input checked="" type="checkbox"/>
Permit Supplement: <input type="checkbox"/>		Cost of Work: <u>\$3,000</u> <input checked="" type="checkbox"/>

**DESCRIPTION OF WORK (PRINT):**  
ELEC Renovation of master BATHROOM + Kitchen

**Job Address:**  
440 Sansovino Ave  
Folio #: 03-4120-023-3130  
Lot: 4 & 5 Block: 101  
Subdivision: Coral Gables RIVERS sec 2 REV  
Plat book: 26-18 Page:

**PROPERTY OWNER:**  
Name: Miguel Angel Moreno Marin and Glens Magally Muela Chacon  
Address: 440 Sansovino Ave  
City/State/Zip: Coral Gables FL  
Telephone No.:  
Email:

**CONTRACTOR COMPANY NAME:** Steel Remodeling and Custom Home Builders  
Qualifier Name: Bambi BELEC CO.  
Address: 1115 W. 50 PLACE  
City/State/Zip: Hialeah FL 33012  
License No.: 000014282 Telephone No.: 305 970 5667  
Email: eastremodeling@gmail.com sumibbelectrical@comcast.net

**ARCHITECT:**  
Name: Carlos A Maril  
Address: 13600 SW 32 St Miami, FL 33175

**ENGINEER:**  
Name:  
Address:

**BONDING:**  
Name:  
Address:

**MORTGAGE LENDER:**  
Name:  
Address:

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES BOILERS, HEATERS TANKS, AND AIR CONDITIONERS, etc. AFFIDAVIT OF OWNER/LESSEE/AUTHORIZED AGENT: Under penalties of perjury and the City of Coral Gables False Claims and Presentations Ordinance, City Code Chapter 39, I certify that I am the owner or that I have the owner's full consent and authorization to sign this application to obtain a permit to perform the above-mentioned work; that all the foregoing information is accurate; and that all work will be done in compliance with all applicable laws regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. The Historical Resources & Cultural Arts Department's approval is required prior to the issuance of a demolition permit. The Qualifier cannot be below as Owner/Lessee/Authorized Agent.

Signature of Owner/Lessee/Authorized Agent: [Signature]

Signature of Qualifier: [Signature]

Owner/Lessee/Authorized Agent Name (Print):

Qualifier Name (Print): EULALIO BEEVIDES

STATE OF FLORIDA )  
SS )  
COUNTY OF MIAMI-DADE )  
Sworn to or affirmed and subscribed before me this 5th day of February in the year 2018 by [Signature] and I, personally known to me and his personally known to me of has produced \_\_\_\_\_ as identification.  
My Commission Expires: December 18, 2017  
Notary Public [Signature]

STATE OF FLORIDA )  
SS )  
COUNTY OF MIAMI-DADE )  
Sworn to or affirmed and subscribed before me this 5th day of February in the year 2018 by [Signature] and I, personally known to me of has produced \_\_\_\_\_ as identification.  
My Commission Expires: August 23, 2019  
Notary Public [Signature]





Tab Groups  
Toolbox

Permit #  Address   
 Permit type

Group	Action Code	Action Description	Completion Date	Complete Code
1	PERMIT PROCESSING	Routed		
2	CASHIER	Routed		
3	NOTICE OF COMMENCEMENT	Routed		
-	4	INSPECTION	Working	
4	el023	ELECTRICAL ROUGH		<input type="checkbox"/>
4	el023	ELECTRICAL ROUGH	02/20/2018 12:00:00 AM	<input checked="" type="checkbox"/> reject
4	el023	ELECTRICAL ROUGH	02/21/2018 12:00:00 AM	<input checked="" type="checkbox"/> part
4	el179	FINAL ELECTRICAL		<input type="checkbox"/>



Development Services Department  
405 Biltmore Way, 3<sup>rd</sup> Floor  
Coral Gables, Florida 33134



Tel: 305-460-5235  
Fax: 305-460-5261  
www.coralgables.com  
applications@coralgables.com

**CITY OF CORAL GABLES**  
**DEVELOPMENT SERVICE DEPARTMENT**  
**Permit Application**

ALL OF THE FOLLOWING MUST BE COMPLETED BY APPLICANT ACCORDING TO FS 713.135

Date:	Permit Type:	Master Permit #:
Permit Change: <input checked="" type="checkbox"/>	Building <input checked="" type="checkbox"/>	BL 1712 1814
Change of Contractor <input type="checkbox"/>	Electrical <input type="checkbox"/>	Sub Permit #: PL 1801 1503
Permit Extension <input type="checkbox"/>	Mechanical <input type="checkbox"/>	Project Information: <input checked="" type="checkbox"/>
Permit Renewal <input type="checkbox"/>	Plumbing <input checked="" type="checkbox"/>	Commercial: <input type="checkbox"/> Residential: <input checked="" type="checkbox"/>
Permit Revision <input type="checkbox"/>	Misc. <input type="checkbox"/>	Linear Feet: <input checked="" type="checkbox"/>
Permit Supplement <input type="checkbox"/>	App: <i>lm</i> Date: 2-14-18	Square Feet: <input checked="" type="checkbox"/>
		Cost of Work: <input checked="" type="checkbox"/>

**DESCRIPTION OF WORK (PRINT):**

**Job Address:**  
440 Sansovino Ave  
Folio #: 03-4120-023-3130  
Lot: 4 & 5 Block: 101  
Subdivision: Coral Gables Riviera sec 2 REV  
Plat book: 28-18 Page: Best Plumbing

**PROPERTY OWNER:**  
Name: Miguel Angel Moreno Marín and Glora Magally Masís Chacón  
Address: 440 Sansovino Ave  
City/State/Zip: Coral Gables FL  
Telephone No.:  
Email:

**CONTRACTOR COMPANY NAME:**  
Qualifier Name: Joseph Rodriguez  
Address: 251 east / 44th street  
City/State/Zip: Hialeah FL 33013  
License No.: CFC 1426732 Telephone No.: 305-5588544  
Email: saadremodeling@gmail.com

**ARCHITECT:**  
Name: Carlos A Marti  
Address: 13600 SW 32 St Miami, FL 33175

**ENGINEER:**  
Name:  
Address:

**BONDING:**  
Name:  
Address:

**MORTGAGE LENDER:**  
Name:  
Address:

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES BOILERS, HEATERS' TANKS, AND AIR CONDITIONERS, etc. **AFFIDAVIT OF OWNER/LESSEE/AUTHORIZED AGENT:** Under penalties of perjury and the City of Coral Gables False Claims and Presentations Ordinance, City Code Chapter 39, I certify that I am the owner or that I have the owner's full consent and authorization to sign this application to obtain a permit to perform the above-mentioned work; that all the foregoing information is accurate; and that all work will be done in compliance with all applicable laws regulating construction and zoning. **WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.** The Historical Resources & Cultural Arts Department's approval is required prior to the issuance of a demolition permit. The Qualifier cannot sign below as Owner/Lessee/Authorized Agent.

Signature of Owner/Lessee/Authorized Agent: *[Signature]*

Signature of Qualifier: *[Signature]*

Owner/Lessee/Authorized Agent Name (Print):

Qualifier Name (Print): JOSEPH RODRIGUEZ

STATE OF FLORIDA )  
SS )  
COUNTY OF MIAMI )  
NOTARY PUBLIC )  
ANGEL SAAD )  
MY COMMISSION # FF 163932 )  
EXPIRES: December 16, 2017 )  
Sworn to and affirmed and subscribed before me this 14 day of February in the year 2018 by )  
MIGUEL ANGEL MORENO MARIN who has taken an oath and is )  
personally known to me or has produced \_\_\_\_\_ as identification. )  
My Commission Expires: *[Signature]*  
Notary Public

STATE OF FLORIDA )  
SS )  
COUNTY OF MIAMI-DADE )  
NOTARY PUBLIC )  
ANN CAROLINE DEL VALLE )  
My Commission Expires: Jun 10, 2018 )  
Commission # FF 131525 )



Permit #  Address   
 Permit type

Group	Action Code	Action Description	Completion Date	Complete Code
1	PERMIT PROCESSING	Routed		
2	CASHIER	Routed		
3	NOTICE OF COMMENCEMENT	Routed		
-	4	INSPECTION	Working	
4	pl001	FINAL PLUMBING		<input type="checkbox"/>
4	pl062	PLUMBING ROUGH	02/20/2018 12:00:00 AM	<input checked="" type="checkbox"/> apvd
4	pl125	PLUMBING TUB SET & WATER PIPING		<input type="checkbox"/>
4	pl125	PLUMBING TUB SET & WATER PIPING	03/09/2018 12:00:00 AM	<input checked="" type="checkbox"/> part