



# Board of Architects Review Application

Phone: 305.460.5245

Email: boardofarchitects@coralgables.com



04

## Application Request

The undersigned Agent/Owner request(s) Board of Architects review of the following application(s):  
(Choose one (1) from Section #1 and choose all applicable from Section #2)

1. ☒ New Building OR ☐ Alterations / Additions OR ☐ Color Palette Review
2. ☒ Preliminary Approval  
☐ Coral Gables Mediterranean Style Design Standards Bonus Approval  
☐ Final Approval

## Property Information

Street Address of the Subject Property: 5200 SW 88 Street, Coral Gables, FL 33156

Property/Project Name: Hammock Residence

Legal description: Lot(s) 6 55 41 Hammock Lake No 2 PB 51-81 LOT 9 LESS BEG NE COR LOT 8 SWLY 235FT TH NELY 2.56FT TH NWLY & WLY 179.92FT TO POB & LESS BEG SE COR LOT 9 N60FT WLY 204FT SWLY 72.56FT E255FT TO POB

Block(s) \_\_\_\_\_ Section(s) \_\_\_\_\_

Folio No. 03-5106-003-0090

Owner(s): Legacy 5200 LLC

Mailing Address: 3850 Bird Road, 8th Floor, Miami, FL 33146

Telephone: \_\_\_\_\_ Fax \_\_\_\_\_

Other \_\_\_\_\_ Email charmaine@moccagroup.com

Architect(s)/Engineer(s)/Contractor(s): Studio Anda LLC

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: \_\_\_\_\_

Telephone: (786) 797-4428 Business \_\_\_\_\_ Fax \_\_\_\_\_

Other (214) 708-7454 Email andrea@studioanda.com

## Project Information

Project Description(s): New two-story single-family residence (8,840 square feet)

Estimated project cost\*: \$1,600,000

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

Date(s) of Previous Submittal(s) and Action(s): None



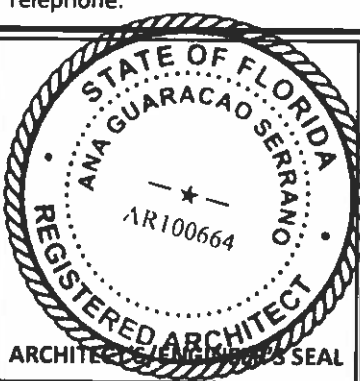
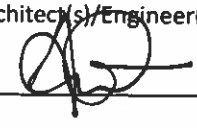
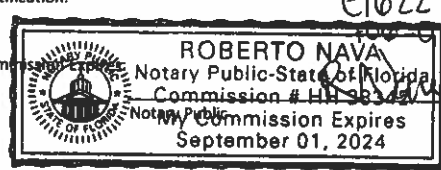
# Board of Architects Review Application

## Applicant/Owner/Architect/Engineer Affirmation and Consent

(I) (We) acknowledge, affirm, and certify to all of the following:

1. This request, application, application supporting materials and all future supporting materials complies with all provisions and regulations of the Zoning Code, Comprehensive Plan and Code of Ordinances of the City of Coral Gables unless identified and approved as a part of this application request or other previously approved applications. Applicant understands that any violation of these provisions renders the application invalid.
2. That all the information contained in this application and all documentation submitted herewith is true to the best of (my) (our) knowledge and belief.
3. Understand that the application, all attachments and fees become a part of the official records of the City of Coral Gables and are not returnable.
4. All application representatives have registered with and completed lobbyist forms for the City of Coral Gables City Clerk's office.
5. Understand that under Florida Law, all the information submitted as part of the application are public records.
6. Failure to provide the information required for submittal/necessary for review by the Board of Architects may cause the application to be deferred without review.
7. That applications for the Board of Architects review require the presence of the applicant and/or architect/engineer at the Board of Architects meeting unless otherwise notified.
8. That plans submitted to this office are required to be picked up at the Board of Architects counter, by the Applicant, within fourteen (14) days after the Board of Architects meeting unless the plans have received Final Approval by the Board of Architects in which case, they will automatically be processed for a building permit. Plans which are not picked up within fourteen (14) days will be discarded.
9. All fees shall be paid by 12-midnight, three (3) days prior to the meeting date (ie. Monday before a Thursday meeting) to secure placement on the meeting's docket (agenda)
10. I have received consent from the owner of the property to file this application.

**NOTE: ONLY ONE SIGNATURE OR AFFIRMATION/CONSENT IS REQUIRED**

Agent/Owner Print Name:		Agent/Owner Signature:	
Address:			
Telephone:		Fax:	Email:
	Architect(s)/Engineer(s)/Contractor(s) Print Name: <b>Ana Guaracao Serrano</b>		Architect(s)/Engineer(s)/Contractor(s) Signature: 
	Address: <b>1800 N Bayshore Dr., #402</b>		
	<b>Miami, FL 33132</b>		
	Telephone: <b>(214) 708-7454</b>		Fax:
	Email: <b>ana@studioanda.com</b>		
STATE OF FLORIDA ) ss COUNTY OF MIAMI-DADE )  Sworn to or affirmed and subscribed before me this <u>6</u> day of <u>aug</u> , in the year 20 <u>21</u> by <u>Ana Guaracao</u> who has taken an oath and is personally known to me or has produced <u>driver's license</u> as identification. <u>61622-013-42</u>		STATE OF FLORIDA ) ss COUNTY OF MIAMI-DADE )  Sworn to or affirmed and subscribed before me this ____ day of ____ in the year 20__ by ____ who has taken an oath and is personally known to me or has produced ____ as identification.	
My Commission Expires 		My Commission Expires: Notary Public	



August 6, 2021

City of Coral Gables  
Planning & Zoning Division  
427 Biltmore Way, 2<sup>nd</sup> Floor  
Coral Gables, FL 33134

**Re: Application for New Residence  
5200 SW 88 Street  
Coral Gables, FL 33156**

**Folio: 03-5106-003-0090**

To Whom It May Concern:

The Hammock Residence, located at 5200 SW 88 Street, is a unique design for a single-family residence located in Hammock Lakes, which takes into consideration the fabric and scale of the existing homes in the community.

The two-story residence is designed as a transitional style, combining gabled roof structures with light, glass breezeways. The proposed structure sits between two landscape features, one including a garden pool and the other including a bocce court and pebbled gardens. The main living spaces of the home open to the gardens, celebrating the lush landscape of the site. The proposed elevations of the home are designed with the importance of both School House Road and 88<sup>th</sup> Street in mind.

We believe the Hammock Residence will be a great addition to the city and respectfully request your consideration of this submittal.

Sincerely,

Andrea Rebull  
Principal, Studio Anda LLC