AB21016067

Board of Architects Review Application

Phone: 305.460.5238 Email: boardofarchitects@coralgables.com

Application Request

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

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

Property Information

Street Address of the Subject Property: 10550 Old Cutler Rd Coral Gables FL 33156

Property/Project Name: Garcia Residence - Renovations & Additions

Legal description: Lot(s) Snapper Creek Lakes Subdivision Plat Book 57 Page 86

Block(s) Lot 10 / Block 3 Section(s)

Folio No. 03-5107-004-0390

Owner(s): Queen Gabriela Corp (N.25)

Mailing Address: 1934 NE 147th Terrace North Miami FL 33181

Telephone: (954) 683.9123 Fax

Other Email haproperties forliving @gmail.com

Architect(s)/Engineer(s): N25 ARCHITECTURE CO. - NORMAN BLANDON

Architect(s)/Engineer(s) Mailing Address: 6262 BIRD RD - 2A - MIA - FL 33155

Telephone: Business 305 666-5151 Fax

Other 305 297-2812 Email N@N25.CC

Project Information

Project Description(s): Renovations & Additions to existing residence, new 2nd level additions, fascade facelift, new entry gates, new ground level breakfast nook, internal renovations

Estimated project cost*: $ 1,500,000.00
(*Estimated cost shall be +/- 10% of actual cost)

Date(s) of Previous Submittal(s) and Action(s): N/A

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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: HECTOR ARELLANO	Agent/Owner Signature:
Address: 1934 NE 147 TERR. NMB, FL 33181	
Telephone: 954 683.9123 / Fax:	Email: HAPROPERTIESFORLIVING@GMAIL.COM
Architect(s)/Engineer(s)/Contractor(s) Print Name: NORMAN BLANDON	Architect(s)/Engineer(s)/Contractor(s) Signature:
Address: 6262 BIRD ROAD, 2A, MIAMI, FL 33155	
Telephone: 305 666 5151	Fax:
Email: NeN25.cc	

STATE OF FLORIDA
NORMAN V. BLANDON
AR0016380
REGISTERED ARCHITECT

ARCHITECT'S/ENGINEER'S SEAL

STATE OF FLORIDA)
ss
COUNTY OF MIAMI-DADE)

Sworn to or affirmed and subscribed before me this 15 day of June, in the year 2021 by NORMAN BLANDON who has taken an oath and is personally known to me or has produced (personally known) as identification.

My Commission Expires: 11/02/2022

Notary Public

Ivett Garofalo
COMMISSION # GG261185
EXPIRES: Nov. 2, 2022
Bonded Thru Aaron Notary

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:

Notary Public