## HISTORIC PRESERVATION AD-VALOREM TAX EXEMPTION

## PART 2 – REQUEST FOR REVIEW OF COMPLETED WORK

## **INSTRUCTIONS:**

Upon completion of the restoration, rehabilitation, or renovation, return this form *with photographs of the completed work (both exterior and interior views of the building)* to the City of Coral Gables Historical Resources Department.

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

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

I. Property identification and location:
Property Name:
Folio Number: #03-4118-005-1280
Street Address: 3701 DURANGO Street, Coral Galobs FL 33134-6433
II. Data on restoration, rehabilitation or renovation project:
Project start date: January 2019
Project completion date: $\frac{5/2o/2021}{}$
Cost of entire project: $\frac{\$}{1,590,413.03}$
Estimated costs attributed to work on historic buildings: $9493,471.92$
Name of architect: John R. FORBES Phone: 305-446-0849 ext. 1020
Name of Contractor: John R. FORBES Phone: 305-446-0849 ext. 1020
Owner attestation: I hereby apply for the historic preservation property tax exemption for the restoration, rehabilitation or renovation work described above and in the Preconstruction Application for this project which received approval on April 19, 2018.  Cachilian le of April 13, 2020 Page 14 of 16
Certificate of Appropriateness April 13, 2020 Page 14 of 16

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

Michel BOUSS Print Name	UGE Signature	07/22/21 Date
Complete the following, i	f signing for an organization	<b>1.</b>
Print Name	Title	Signature
Name of Organization		
Taxpayer Identification N	umber	
Mailing Address		
City	State	Zip Code
Daytime Telephone Num	ber	
Multiple owners must p	provide the same informat	ion as above. Use additional sheets if

[Please attach the photographic documentation here, use additional pages if necessary.

Provide a copy of all photographs on CD, if possible.]

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Jennifer Boussuge Print Name	Signature	07/22 Date	121
Complete the following, if signing f	for an organization	n.	
Print Name	Title	Signature	
Name of Organization			Modele
Taxpayer Identification Number			
Mailing Address			
City	State	Zip Code	<del>-</del>
Daytime Telephone Number			Paties
Multiple owners must provide th	e same informat	tion as above. Use additional .	sheets if

[Please attach the photographic documentation here, use additional pages if necessary.

Provide a copy of all photographs on CD, if possible.]

necessary.

## REVIEW OF COMPLETED WORK TO BE FILLED OUT BY THE LOCAL HISTORIC PRESERVATION OFFICER

Street Address of property 3701 Dwango Street
Folio number 03-4118-005-1780
The local Historic Preservation Officer has reviewed Part 2 (Request for Review of Completed Work) of the Historic Preservation Property Tax Exemption Application for the above named property and hereby:
Determines that improvements to the above referenced property <u>are consistent</u> with the Secretary of Interior Standard's for Rehabilitation and Guidelines for Rehabilitating Historic Buildings and the criteria set forth in Chapter 1A-38, F.A.C., and therefore <u>recommends approval</u> of the requested historic preservation tax exemption.
[ ] Determines that improvements to the above referenced property <u>are not consistent</u> with the Secretary of Interior Standard's for Rehabilitation and Guidelines for Rehabilitating Historic Buildings and the criteria set forth in Chapter 1A-38, F.A.C., and therefore <u>recommends denial</u> of the requested historic preservation tax exemption for the reasons stated in the Review Comments below.
Please list any Review Comments here:
Additional Review Comments attached? Yes [ ] No [ 🖟
Signature:
Typed or printed name: WARREN ARAMS
Title: POSSERVATION OFFICER
Date of Review: 11/20/2022





Countyard looking East



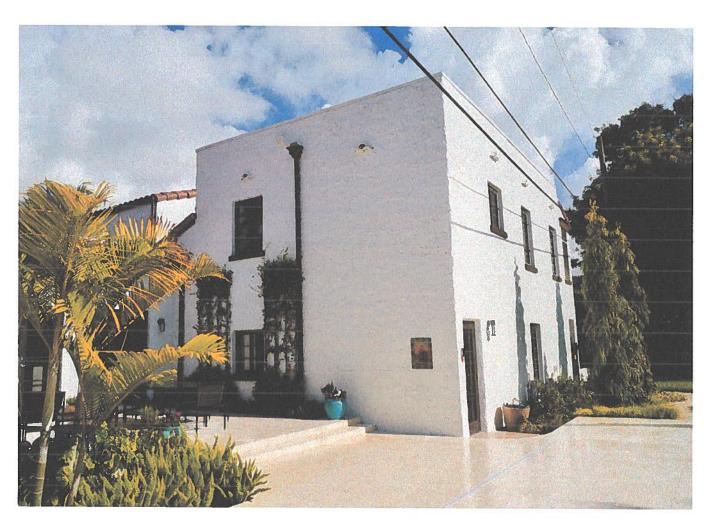
North Jacade from courtyand



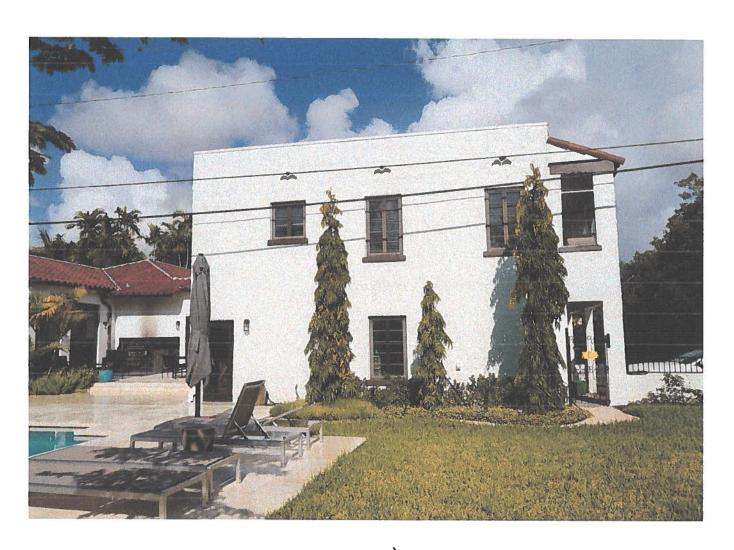
South Jacade from courtyand



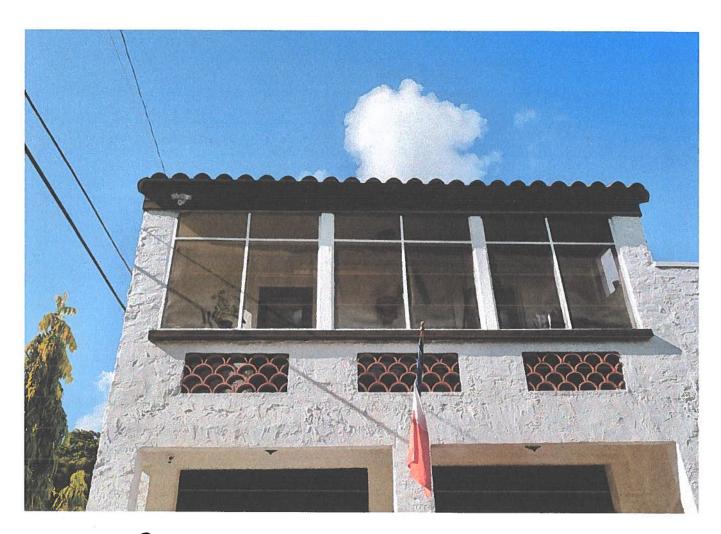
East Jacade



South facade garage



East facade (garage)



Porch alow Garage



North Jacade along Rodrigo Ave



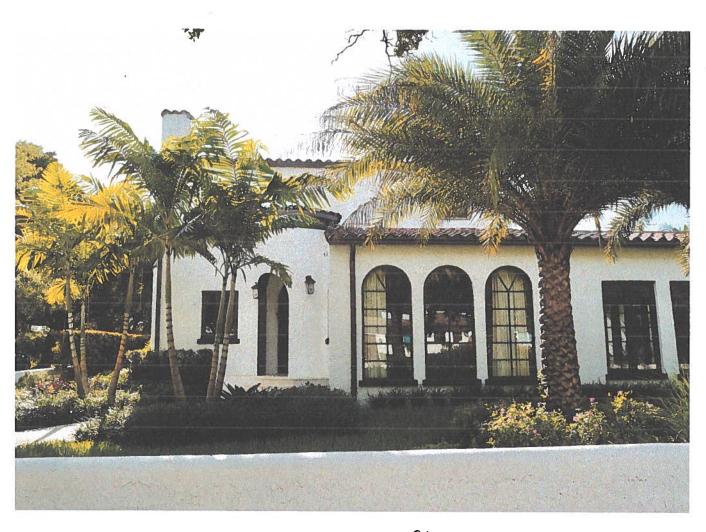
North Bacade along Robrigo Ame



Worth Jacade along Rodrigo Ave.



West Jacade along Durango Street



West facade along Durange St.



North facade along Rodrigo Ane





