## CERTIFICATE OF APPROPRIATENESS APPLICATION CITY OF CORAL GABLES - HISTORIC PRESERVATION DIVISION

1.	1203 A) Greenway Dr.	
	1203 N Green (e) Gy D:  Building Address Coral Gables, FC 33134  District Name (if any)	
	17 E18 11 CG Section E	
	Logal Description: Lot(s) Block(s) Section	
· Christophe	her Mithael MemonTi 1203 NGreenway Dr. Cocal Galder R.	3313 K
<u> </u>	Owner's Name Street Address Zip Code Phone No.	سر در
(Require	nired) c-mail:	
(Require	Applicant's Name Street Address Zip Code Phone/Fax	
	Contractor/Arch/Engineer's Name Street Address Zip Code Phone/Fax	
(Require	nuired) e-mail:	
2.	PLEASE INDICATE THE CATEGORY WHICH DESCRIBES THE PROPOSED WORK:	
2.		
	Minor AlterationsNew ConstructionAdditionRehabilitation  DemolitionOther: (1) 10 dea (1) 5 & Dee (5)	
	Demonder Outer, W177(4545 & 150-15)	
3.	Will the work proposed require a variance from the Zoning Code?	
	NO YES, from section(s)  Attach the requested variance language to this form	
	. , , ,	
4.	Has this property been qualified as a Coral Gables Cottage? NO YES (attach a copy of qualification sheet)	
5.	This request is: Inew result of a violation a revision to a previous submittal a revision to a previously approved COA	
6.	Case File: Case File: Case File:	
<b>0.</b>	Replace 9 Doors & 33 windows To imact	
	1000/3 9 33 WINDOWS 10 199/2 (1)	
7.	Variance requests require a processing fee. Payment must be included with the application. Please make check payable to the	
,,	City of Coral Gables. Applications for ad valorem tax relief must be filed on a separate application form prior to construction.	
8. >	The following supplementary information (where applicable) shall be provided:*	
م STAFF USE ONLY	Site Plan (with dimensions)Floor Plan(s) (with dimensions)Elevations(s) (with dimensions)Mailing list & 3 sets of labels	
98	Before/After Before/After Before/After VARIANCES/DEMOLITIONS	
ž US	Photos Survey(5 yrs or younger) Color/Material Sample Letter of Intent Regular size Reduced Plans 11x17 Labeled Board review (1 Orig + 16 copies) Board review (16 swatches) Board review (16 copies) 1 signed/scaled set Board review 2 sign/scal + 14reg.	
AFI	2 per page Non-Board (I original) Non-Board review (1 set) Non-Board review (1 copy) Non-Board review (1 set)	
TS	Copy of Board of ArchitectsCD with electronicFee due toPowerPointOther  Comments/Recommendations copies of drawings/photos variances/violations CD/USB	
	Application will not be scheduled for a hearing unless received in completed form by the established due date (subject to staff review).	
	<ul> <li>Applications will be accepted only when a completed application form is submitted together with the necessary supplemental materials.</li> </ul>	
	<ul> <li>All drawings &amp; supporting information must be collated into the correct number of packets and clearly labeled.</li> <li>Applicant or his/her representative <u>MUST</u> attend hearing and present his/her proposal to the Board.</li> </ul>	
•	<ul> <li>A paint sample visible from the public side of the structure must be applied to the building no less than ten days from the hearing date.</li> </ul>	
	<ul> <li>Board of Architects recommendation <u>MUST</u> be obtained prior to the submission of any Certificate of Appropriateness application.</li> <li>The Historic Preservation Board will act on completed applications only. Decisions made by the Board may be appealed to the City</li> </ul>	
	Commission no later than 10 days after the ruling is made. If there is no appeal or Commission action, the Historic Preservation Board	
F	decision shall be final.	
has ropher	I, Michael Clementi , as Owner of Lot(s) do hereby authorize the	
	(Finit Owner's Ivanie)	
c.	filing of this application. $5/20/24$	
	(Overe's Signature)  (Overe's Signature)  (Overe's Signature affirms and certifies that I/we understand and will comply with the provisions and regulations of the City of Coral Gables Historic	
1	Preservation Ordinance as amended from time to time. It further certifies that any statements made in the application, documents attached to the	
į	application, and plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that the application, attachments and fees become part of the Official Records of the Historic Preservation Division and are not returnable. The above signed consents to inspection and	
	photographing of the subject property by the Historic Preservation staff for purposes of consideration of this application and/or presentation to the Historic Preservation Board. Applicants seeking approval of alterations, demolitions and/or new construction acknowledge that the City may erect signs	
Ļ	on the subject property, which state the proposed action and the date of the Historic Preservation Board meeting.	
ISE	DATE RECEIVED: CTTY OF CORAL GABLES HISTORICAL RESOURCES &	
STAFF USE ONLY	CASE FILE: CULTURAL ART'S DEPARTMENT 2327 SALZEDO STREET, 2 <sup>80</sup> FLOOR	
# 6l		
27		
ST	EDEN FILE:  CORAL GABLES, TEORIDA 33134 Phone: (305) 460-5090/5094/5096 Fax: (305) 460-5090/5094/5096 Fax: (305) 460-5097 Fax:	

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