



Board of Architects Review Application



04

Phone: 305.460.5245

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 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: 740 San Juan Drive, Coral Gables, FL 33143

Property/Project Name: Quiñonez Residence

Legal description: Lot(s) San Juan Heights PB 57-16, Lot 13

Block(s) _____ Section(s) _____

Folio No. 03-4132-002-0130

Owner(s): Yvonne Mayorga Quiñonez

Mailing Address: 1148 S. Alhambra Circle, Coral Gables, FL 33146

Telephone: (305) 666-1166 Fax cell (305) 776-0635

Other (305) 632-9465 Email luciaQdeSola@gmail.com

Architect(s)/Engineer(s)/Contractor(s): HAMED RODRIGUEZ ARCHITECT

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 275 MINORCA AVE. CORAL GABLES FL

Telephone: 305 244 5626 Business _____ Fax _____

Other _____ Email HAMED@HR-ARCHITECTS-INC.COM

Project Information

Project Description(s): NEW SINGLE FAMILY HOME IN A CONTEXTUAL FLORIDA VERNACULAR STYLE. PLAN IS DESIGNED TO SHOWCASE MATURE OAK TREE AT CENTER.

Estimated project cost*: \$ 937,250

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

Date(s) of Previous Submittal(s) and Action(s): _____



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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: <u>Yvonne M. Quinonez</u>		Agent/Owner Signature: <u>[Signature]</u>	
Address: <u>1148 S. Alhambra Circle, Coral Gables, FL 33146</u>			
Telephone: <u>(305) 776-0635</u>		Fax: <u>—</u>	
		Email: <u>Lucia QdeSola@gmail.com</u>	
	Architect(s)/Engineer(s)/Contractor(s) Print Name: <u>HAMED RODRIGUEZ</u>		Architect(s)/Engineer(s)/Contractor(s) Signature: <u>[Signature]</u>
	Address: <u>275 MINORCA AVE</u>		
	<u>CORAL GABLES FL. 33134</u>		
	Telephone: <u>(305) 244 5626</u>		Fax: <u>—</u>
	Email: <u>HAMED@HR-ARCHITECTS-INC.COM</u>		
STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE) Sworn to or affirmed and subscribed before me this <u>14</u> day of <u>Sept</u> in the year 20 <u>20</u> by <u>Yvonne M. Quinonez</u> who has taken an oath and is personally known to me or has produced _____ as identification.		STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE) Sworn to or affirmed and subscribed before me this <u>14</u> day of <u>Sept</u> in the year 20 <u>20</u> by <u>Hamed Rodriguez</u> who has taken an oath and is personally known to me or has produced _____ as identification.	
My Commission Expires: <u>9/12/2022</u> 		My Commission Expires: <u>9/12/2022</u> 	



HamedRodriguez
architects

Architecture Planning Interiors
275 Minorca Ave. Coral Gables Florida 33134
305-529-9967 hamed@hr-architects-inc.com
AA26002034

September 14th 2021

Quinonez Residence
740 San Juan Drive
Coral Gables Florida 33143

Submittal Requirements for Preliminary Approval BOA

Re: New Residential Design for Coral Gables Board of Architect Submittal

The scope of work consists of a new one story single family residence in the Florida Vernacular Style. The front elevation works harmoniously with the surrounding homes in style and scale. The floor plan of the house is focused on views of a specimen oak tree in the center back yard.

By way of this letter, the Architect is stating that the digitally submitted drawings replicates the physical signed and sealed drawings previously submitted.

Hamed Rodriguez

AR93261