



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 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: 5815 MAYNADA STREET, CORAL GABLES FLORIDA 33146-2653

Property/Project Name: SAPORTA RESIDENCE

Legal description: Lot(s) C. GABLES RIVIERA

Block(s) 19,20 & 20-A BLK 147 LOT 75'X100' Section(s) PT 8

Folio No. 03-4130-003-0090

Owner(s): CHRISTIAN A. SAPORTA / DIANA P. CABANZO

Mailing Address: 5815 MAYNADA STREET, CORAL GABLES, FL 33146-2653

Telephone: 786.502.7698

Fax

Other Email Cabanzo.d @ gmail.com

Architect(s)/Engineer(s)/Contractor(s): LUIS E. URIARTE

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 18100 ATLANTIC BLVD. SUITE 506, SUNNY ISLAND FL 33160

Telephone: 786-290-9807

Business

Fax

Other Email Invusa @ live.com

Project Information

Project Description(s): ADDITION OF SECOND FLOOR ABOVE EXISTING GARAGE AND KITCHEN
REMODELATION OF GROUND FLOOR ADD A POWDER ROOM, UPDATE BATHROOM & KITCHEN

Estimated project cost*: \$ 130,000.00

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

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



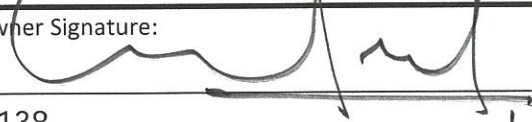
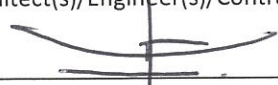
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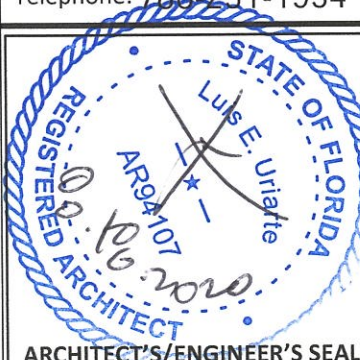
Applicant/Owner/Architect/Engineer Affirmation and Consent

(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: Cesar Lucero		Agent/Owner Signature: 	
Address: 1508 NE 105 Street, Miami Shores Florida 33138			
Telephone: 786-251-1954		Email: clucero10@gmail.com	
Architect(s)/Engineer(s)/Contractor(s) Print Name: LUIS E. URIARTE		Architect(s)/Engineer(s)/Contractor(s) Signature: 	
Address:			
18100 ATLANTIC BLVD. SUITE 560, SUNNY ISLAND FL 33160			
Telephone: 786.290.9807		Fax:	
Email: Invusa@live.com			

 <p>ARCHITECT'S/ENGINEER'S SEAL</p>	<p>STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE)</p> <p>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.</p> <p>My Commission Expires: _____ Notary Public</p>	<p>STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE)</p> <p>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.</p> <p>My Commission Expires: _____ Notary Public</p>
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BOARD OF ARCHITECTS REVIEW APPLICATION.

PRELIMINARY APPROVAL SUBMITTAL.

5815 MAYNADA STREET, CORAL GABLES. FL. 33146-2653

Ref. Architectural Style statement.

The concept for the proposed remodeling is based on the response of the architectural lines from the existing construction **(A)**. The transition between the new and the existing is achieved through an architectural element defined as a "Portico" **(B)**, which becomes the focal point of the entrance. This "Portico" is created with a new architectural feature wall, which becomes a statement on its own, both for its height and for the usage of a noble cladding material - such as stone. The wall height is greater than the existing top beam, to create a visual bridge between the existing one-story house and the two-story addition. A concrete canopy is used to highlight both the access and the horizontality of the proposed architectural style.

For the two stories addition **(C)** an architectural volume of pure and simple lines is proposed, recreating cubic architectural style and clean proportions- which is emphasized by using smooth stucco painted in white color. The existing Red Barrel tile will replace with a new flat tile grey color as shown.



(C)

(B)

(A)

Luis E. Uriarte

FLA. REG# 94107