





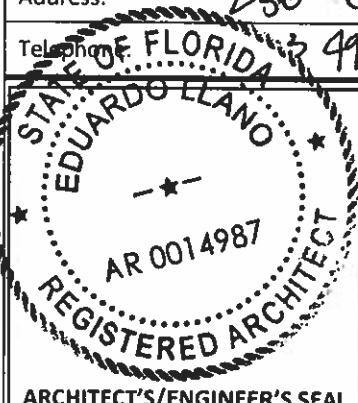
## Board of Architects Review Application

### 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: <b>EDUARDO LLANO</b>		Agent/Owner Signature: <i>[Signature]</i>	
Address: <b>250 CATALONIA AVE #407</b>			
Telephone: <b>3-498-4144</b>		Fax: <b>3-496-8383</b>	
Email: <b>Eddy-Llano@msn.com</b>		Email: <b>Eddy-Llano@msn.com</b>	
		Architect(s)/Engineer(s)/Contractor(s) Print Name: <b>EDUARDO LLANO</b>	
		Architect(s)/Engineer(s)/Contractor(s) Signature: <i>[Signature]</i>	
		Address: <b>250 CATALONIA AVE #407</b>	
		Telephone: <b>3-498-4144</b>	
Fax: <b>3-496-8383</b>		Email: <b>Eddy-Llano@msn.com</b>	
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		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	

**EDUARDO LLANO**  
**A · R · C · H · I · T · E · C · T**

February 24, 2021

Board Of Architects  
City Of Coral Gables  
405 Biltmore Way  
Coral Gables, Florida 33134

Re: Letter of Intent

To whom it may concern:

The intent of this project is an addition and remodeling of existing two story residence. The addition expands the existing kitchen and provides a new stair connection to new living area above existing garage. The second floor addition is adjacent to the existing two story portion of residence. The additional square footage is 379 Sf on ground floor and 732 Sf on the second floor. The existing kitchen will be remodeled. The new roof for addition will match existing roof of residence.



250 Catalonia Ave. Suite 407  
Coral Gables, FL 33134

Tel (305) 446-1121 \* Fax (305) 446-8383  
Eddy\_Llano@msn.com