



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: 1203 N. Greenway Drive, coral Gables, FL., 33134

Property/Project Name: Clementi Residence Addition

Legal description: Lot(s) 17 & 18

Block(s) 4 Section(s) Coral Gables SEC E

Folio No. 03-41-07-016-0530

Owner(s): Michael S Clementi, as Trustee of the Poppy Revocable Trust

Mailing Address: 1203 N. Greenway Dr., Coral gables, FL., 33134

Telephone: 305-458-5813

Fax

Other Email michaelclementi15 @ gmail.com

Architect(s)/Engineer(s)/Contractor(s): Victor Hernandez

Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 11423 Sea Grass Cir, Boca Raton, FL 33498

Telephone: 954-247-1389 Business 754-422-8796

Fax

Other Email HSD @ Consultants.com

Project Information

Project Description(s): 2-Storey unattached addition to existing house. 2-car Garage on ground level and a bedroom above with balcony facind existing pool area.

Estimated project cost*: \$95,000.00

(*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: Mark Tatis		Agent/Owner Signature:	
Address: 2925 NW 126 Ave. Unit 106 Sunrise, FL., 33323			
Telephone: 305-773-1311		Fax:	Email: radinc2002@gmail.com
	Architect(s)/Engineer(s)/Contractor(s) Print Name: Victor Hernandez		Architect(s)/Engineer(s)/Contractor(s) Signature:
	Address: 11423 SEA GRASS CIR, BOCA RATON FL 33498		
	Telephone: 754-422-8796		Fax: —
	Email: hsl@consultant.com		
	ARCHITECT'S/ENGINEER'S SEAL		
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:		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 _____	

SCOPE AND INTENT OF PROPOSED ADDITION

SCOPE OF WORK

To add a 2-car garage, (approximately 600 sq. ft.) on Ground Level with a Second Floor for a Bedroom, Bathroom, and a Balcony overlooking the pool area. This structure will be attached to the existing house using an open breezeway as the connector as required per Code.

The space is located in Columbus Blvd. side where there is already an existing gate and existing asphalt driveway. The new Garage will have the required setbacks of 10'-0" from back property line and 15'-0" from Columbus Blvd. property line, as required by Code.

INTENT OF WORK

To design the addition to have the same architectural details as the existing house by matching same color and materials on exterior, wrought iron work in balcony, continue same existing brick pavers on walkways, maintain same proportions in arches and trims as existing, use of canvas awnings on windows (color and configuration to match existing ones), use same roof pitch prominent in existing house, the use of same red barrel clay roof tiles, new doors and windows will match existing also.