Contest	Board of Architects Review Application 04 Phone: 305.460.5245 Email: boardofarchitects@coralgables.com
Applic	ation Request
T he undersi (Choose one	gned Agent/Owner request(s) Board of Architects review of the following application(s): (1) from Section #1 and choose all applicable from Section #2) <u>1. INew Building OR Alterations / Additions OR Color Palette Review</u> <u>2. Preliminary Approval</u>
	Coral Gables Mediterranean Style Design Standards Bonus Approval Final Approval
	ty Information
	ss of the Subject Property: 5577 Aubor Lane, Coral Gables, FL 33156
	ject Name: Arbor Lane Residence
.egal descrip	tion: Lot(s) Snapper Greek Lakes Sub 1st ADDN, PB 67-22, Lots 5+5-A
-	Section(s)
olio No(13-5106-012-0050
	Tand Cinc.
	ess: 725 NE 125th St, North Mjami, FL 33161
elephone:	305-895-8430 Fax 305 892 1394
ther	Email hunter @ hhadvertising net
rchitect(s)/E	ngineer(s)/Contractor(s): Hamed Rodriguez
	ngineer(s)/Contractor(s) Mailing Address: 275 Minorca Ave. Coral Grables, Fl 33134
elephone:	305 529 9467 Business 305 244 5626 Fax
	Email hanved @ hr - architects - inc. con
	Information
nd exter	ption(s): Addition of L, 180 SF to existing residence. Also restyling from 90's can to a tropical transitional outdoor inspired architecture. Inclusive of hush Landscope ject cost*: \$ 500,000.00 Dost shall be +/- 10% of actual cost)
Estimated c	



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:	and the state of t	Agent/Owne	r Signature:		
Stewart U. St	2	Ctewa	RT V.	Ange 11	
Address: 725 NG	25th St. Nor	th Mu	MI FC	33/61	
Telephone: 305 815-000					
/	Architect(s)/Engineer(s), Print Name:			gineer(s)/Contractor(s) Signature:	
	Address:				
	Telephone:		Fax:		
ARCHITECT'S/ENGINEER'S SEAL					
STATE OF FLORIDA) SS COUNTY OF MIAMI-DADE) Sworn to or affirmed and subscribed before muther the year 20 by Houng V and oath and is personally known to me of has pro- as identification My Commission Expires: SEBAST MALEMRADUE RANGE Notary Public - State of Florie Commission # GG 231092 My Comm. Expires Jun 21, 20 Bonded through National Notary Median	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 and is personally known to me or has produced as identification. My Commission Expires: My Commission Expires:				

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ArchitecturePlanningInteriors275 Minorca Ave. Coral GablesFlorida 33134305-529-9967hamed@hr-architects-inc.comAA26002034

March 3, 2021

5577 Arbor Lane Addition and Alteration 5577 Arbor Lane Coral Gables Florida 33156

Submittal Requirements for Preliminary Approval BOA

Re: Addition and alteration of an existing single family residence for presentation to the Coral Gables Board of Architects

The scope of work consists of the restyling of an existing Mediterranean style home into a tropical- transitional style. Scope of work includes the remodeling of most of the existing interiors and the added space of the converted courtyard into interior space. New terrace, attached 2 story element and pavilion.

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