N. A.	itects Review Application Email: boardofarchitects@coralgables.com		
Phone: 305.460.5238			
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 Ap Coral Gables M Final Approva	Mediterranean Style Design Standards Bonus Approval		
Property Information			
Street Address of the Subject Property: 3441 Alhambra Circle - Coral Gables, Florida 33134			
Property/Project Name:Beeck Residence Addition and Remodeling			
Legal description: Lot(s) 19 thru 22, part of lots 23, 24 & 25			
Block(s)_50	Section(s) Coral Gables Country Club Section 4 / PB 10-57		
Folio No. 03-4118-006-0120			
Owner(s): Willy Martin Beeck			
Mailing Address: 3441 Alhambra Circle - Coral Gables, Florida 33134			
Telephone:	Fax		
Other	Email@		
Architect(s)/Engineer(s)/Contractor(s): Raymond Pacheco			
Architect(s)/Engineer(s)/Contractor(s) Mailing Address: 4990 SW 72 Avenue, Suite 101 - Miami, Fl. 33155			
	<sub>Fax</sub> (305) 666-3871		
Other ramon@pachecomartinez.com	Email@		
Project Information			
Project Description(s): Existing two-story resid	dence addition & remodeling (Gross Area 9,012 X 200.00 = \$1,802,400.00)		
Estimated project cost*: \$1,800,000.00			
(*Estimated cost shall be +/- 10% of actual cos	t)		
Date(s) of Previous Submittal(s) and Action(s):			



## 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.
- That all the information contained in this application and all documentation submitted herewith is true to the best of (my) (our) knowledge and belief.
- 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.
- 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.
- 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:	Agent/Owner Signature:		
Address:			
Telephone: Fax:		mail.	
YAC AF	venue, Suit 6-2573	rchitect(s)/Engineer(s)/Contractor(s) Signature. e 101 - Miami, Florida 33155 Fax: (305) 666-3871 ez.com	
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.  much has taken an oath and is personally known to me or has produced    My Commission Expires:	STATE OF FLORIDA  )    SS  COUNTY OF MIAMI-DADE    Sworn to or affirmed and subscribed bacore me this  3    day of  0    who has taken an oath    and is personally known to me or has produced    as identification.    My Commission Expires:    My Commission Expires:		



August 17, 2021

City of Coral Gables Planning & Zoning Division 427 Biltmore Way, 2<sup>nd</sup> Floor Coral Gables, Florida 33134

## Re: Application for Addition and Remodeling to an Existing Residence 3441 Alhambra Circle Coral Gables, Florida 33134 Folio: 03-4118-006-0120

To whom it may Concern:

This proposed existing two-story residence to be remodeled is beautifully located within the picturesque "Coral Gables Country Club Section 4". The surrounding area is filled with lush vegetation and an eclectic mix of architectural styles and archetypes. Our proposed design respects the Plantation architecture style as set forth by the City of Coral Gables. A combination of a formal floor plan, soft color tones for graceful blending into its surroundings as well as warm material selections and comfortable scale for easier human interaction.

We appreciate the matter of consideration in this matter. Thank you very much Original Since ally Provide the Construction of the Construction of