

## General Procedures - Non-Conditional

Address: 427 Biltmore Way, 2<sup>nd</sup> Floor, Coral Gables, Florida 33134 Email: planning@coralgables.com Phone: 305.460.5211

#### Development Review General Procedures - Non-Conditional

The Development Review Committee (DRC) is an administrative and technical committee which reviews policy and technical issues raised by a development project. The DRC is intended to streamline and coordinate the review of the development process by identifying, addressing, providing input, advice and comments regarding all applicable provisions and regulations. The review of the projects and comments on development proposals by the DRC shall not be construed to be an approval of any project presented to the Committee.

| Application review request   |
|--|
| The undersigned applicant(s)/agent(s)/property owner(s) request(s) Level Two (2) Development Review Committee consideration and review for the following application(s) (please check all that apply): |
| ☐ Permitted use new construction, additions, and alterations to buildings and/or structures (Board o Architects review only).  |
| $\square$ Change in use or occupancy.  |
| ☐ Other:   |
| Coral Gables Mediterranean Architecture Bonus  |
| ☐ Coral Gables Mediterranean Style Bonus - Table 1   |
| ☐ Coral Gables Mediterranean Style Bonus - Table 2   |
| Coral Gables Mediterranean Style Bonus - Table 3   |
| □ None   |
| Property information   |
| Street address of the subject property:  |
| Property/project name:   |
| Current land use classification(s):  |
| Current zoning district(s):  |
| Proposed land use classification(s) (if applicable):   |
| Proposed zoning district(s) (if applicable):   |
| Last use/current use of the property/building(s):  |
| Proposed use(s) of the property/building(s):   |
| Size of property (square feet/acres):  |
| Total non-residential (i.e, commercial, office, etc.) floor area (total square feet/FAR):  |
| Total number of residential units per acre and total number of units:  |
| Estimated cost of the existing/proposed building/project:  |



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| Application(s) and date(s) of all previous City of Coral Gables submittals and type of actions related to existing/proposed building/project: |                 |         |                |
|---|-----------------|---------|----------------|
|   |                 |         |                |
|   |                 |         |                |
| Project Legal Description: Lot(s):  |                 |         |                |
| Block(s):   |                 |         |                |
| Section(s):   |                 |         |                |
| Listing of all folio numbers for su   | bject property: |         |                |
|   |                 |         |                |
|   |                 |         |                |
|   |                 |         |                |
|   |                 |         |                |
| Conoral information   |                 |         |                |
| Applicant(s)/Agent(s) Name(s): _  |                 |         |                |
| Telephone Contact No:   | Fax No.:        | Email:  |                |
| Mailing Address:  |                 |         |                |
| (City   | ')<br>          | (State) | (ZIP Code)     |
| Property Owner(s) Name(s):  |                 |         |                |
| Telephone Contact No:   | Fax No.:        | Email:  |                |
| Mailing Address:(City   | ·/              | (State) | <br>(ZIP Code) |



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| Property Owner(s) Name     | (s):                                   |         |            |
|----------------------------|--|---------|------------|
| Telephone Contact No:      | Fax No.:                               | Email:  |            |
| Mailing Address:           |  |         |            |
|                            | (City)                                 | (State) | (ZIP Code) |
| Project Architect:         |  |         |            |
| Telephone Contact No:      | Fax No.:                               | Email:  |            |
|                            |  |         |            |
| Mailing Address:           |  |         |            |
|                            | (City)                                 | (State) | (ZIP Code) |
|                            | (City)  ypes of application(s) previou | (State) |            |
| Provide the date(s) and ty | (City)  ypes of application(s) previou | (State) |            |
| Provide the date(s) and ty | (City)  ypes of application(s) previou | (State) |            |
| Provide the date(s) and ty | (City)  ypes of application(s) previou | (State) |            |
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### Application requirements and supporting information

Application submittal dates and meeting dates. Applications for the DRC shall be submitted in no later the first Friday of each month to be tentatively scheduled for the same monthly DRC meeting. DRC meetings are held the last Friday of each month, 9:30 a.m. First Floor Board Room, 427 Biltmore Way, Coral Gables, Florida 33134. Applicants and/or agent shall be required to attend the meeting to present the application request and respond to City Staff questions. All applications shall be complete at time of submittal.

Preapplication Conference Requirements. A Pre-application Conference is required with the Planning and Zoning Division in advance of application submittal to determine the information necessary to be filed with the application(s). The City reserves the right to request additional information as necessary. City staff to check/confirm if all below information is provided at time of application submittal.

| Application submittal (order of documents). The order of the documents for the application submittal shal be as follows (required documents will be determined at pre-application meeting): |
|---|
| $\square$ Table of Contents with page numbers identifying all below documents.  |
| ☐ DRC Application.  |
| $\square$ Statement of use and/or cover letter.   |
| ☐ Aerial.   |
| $\square$ Photographs of property, adjoining properties and/or streetscape.   |
| ☐ Property survey and legal description.  |
| ☐ Architectural drawings (signed/sealed), including: Zoning chart / supporting information; site plan; floo plan(s); and all affected elevations. Maximum of 20 sheets shall be accepted.   |
| $\square$ Landscape plan; vegetation assessment; and tree survey / relocation plan.   |
| ☐ Art in Public Places plan and/or statement.   |
| $\square$ Ordinances, resolutions, covenants, development agreements, etc. previously granted for the property.   |
| ☐ Historical Significance letter.   |
| $\square$ Name and contact information for property owner, applicant, architect, attorney, etc.   |
| $\square$ City of Coral Gables Annual Registration Application and Issue Application Lobbyist forms.  |
| ☐ Warranty Deed.  |
| $\square$ Application fee of \$100.00 dollars in check form, payable to the City of Coral Gables. Submit copy of check.   |
| ☐ Other:  |

Posting of the property. The Applicant will post the subject property with a sign in accordance with the requirements of the Zoning Code indicating the DRC meeting date and location. The sign will be installed ten (10) days prior to the meeting and shall not be removed until after the meeting has been held, at which time it is the applicant's responsibility to remove the sign.



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#### Application submittal requirements

Electronic copy. A PDF of the entire application shall be submitted. The total file size shall not exceed 30 MB.

#### Applicant/agent/property owner/architect affirmation and consent

- (I) (We) affirm and certify to all of the following:
- 1. Submission of the following:
  - a. Warranty deed/tax record as proof of ownership for all properties considered as a part of the application request; or
  - b. Authorized as the applicant(s)/agent(s) identified herein to file this application and act on behalf of all current property owner(s) and modify any valid City of Coral Gables entitlements in effect during the entire review process.
- 2. This request, application, application supporting materials and all future supporting materials complies with all provisions and regulations of the Zoning Code, Comprehensive Land Use 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.
- 3. That all the information contained in this application and all documentation submitted herewith is true to the best of (my) (our) knowledge and belief.
- 4. 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.
- 5. Failure to provide the information necessary pursuant to the established time frames included but not limited to application submittal, submission of revised documents, etc. for review by City Staff and the designated reviewing entity may cause application to be deferred without further review until such time the requested information is submitted.
- 6. All representatives of the application have registered with and completed lobbyist forms for the City of Coral Gables City Clerk's office.
- 7. Understand that under Florida Law, all the information submitted as part of the application are public records.
- 8. The subject property will be posted by the Applicant in accordance with Zoning Code requirements. The sign shall be installed by the City ten (10) days prior to the meeting and shall not be removed until after the meeting, at which time it is the applicant's responsibility to remove the sign.
- The application will not be heard unless the Applicant and/or agent is present at the DRC meeting.



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| Applicant(s)/Agent(s) Signature:  | Applicant(s)/Agent(s) Print Name: |  |
|---|-----------------------------------|--|
|   |                                   |  |
| Address:  |                                   |  |
|   |                                   |  |
| Telephone:  | Fax:                              |  |
| Email:  |                                   |  |
| NOTARIZATION  |                                   |  |
| STATE OF FLORIDA/COUNTY OF The foregoing instrument was acknowledged before                     | e me this day of by               |  |
| (Signature of Notary Public - State of Florida)   |                                   |  |
|   |                                   |  |
|   |                                   |  |
|   |                                   |  |
|   |                                   |  |
|   |                                   |  |
| (Print, Type or Stamp Commissioned Name of Nota ☐ Personally Known OR ☐ Produced Identification |                                   |  |



# **General Procedures - Non-Conditional**

| Property Owner(s) Signature:   | Property Owner(s) Print Name: |  |
|--|-------------------------------|--|
|  |                               |  |
| Property Owner(s) Signature:   | Property Owner(s) Print Name: |  |
|  |                               |  |
| Property Owner(s) Signature:   | Property Owner(s) Print Name: |  |
|  |                               |  |
| Address:   |                               |  |
| Telephone:   | Fax:                          |  |
| Email:   |                               |  |
| NOTARIZATION   |                               |  |
| STATE OF FLORIDA/COUNTY OF The foregoing instrument was acknowledged before me this day of by  |                               |  |
| (Signature of Notary Public - State of Florida)  |                               |  |
|  |                               |  |
|  |                               |  |
|  |                               |  |
|  |                               |  |
|  |                               |  |
| (Print, Type or Stamp Commissioned Name of Notary Public)  ☐ Personally Known OR ☐ Produced Identification; Type of Identification Produced ———————————————————————————————————— |                               |  |



## **General Procedures - Non-Conditional**

| Architect(s) Signature:   | Architect(s) Print Name: |
|---|--------------------------|
|   |                          |
| Address:  |                          |
|   |                          |
| Telephone:  | Fax:                     |
| Email:  |                          |
|   |                          |
| SEAL  |                          |
| NOTAR   | RIZATION                 |
| STATE OF FLORIDA/COUNTY OF The foregoing instrument was acknowledged befor                      | e me this day of by      |
| (Signature of Notary Public - State of Florida)   |                          |
|   |                          |
| (Print, Type or Stamp Commissioned Name of Nota ☐ Personally Known OR ☐ Produced Identification |                          |