

PLAN CORRECTIONS REPORT (PB23-0588)

PLAN ADDRESS:	924 71 St Miami Beach, FL 33141-2916	PARCEL:	0232100130490
APPLICATION DATE:	03/20/2023	SQUARE FEET:	1,755
EXPIRATION DATE:		VALUATION:	\$0.00
		DESCRIPTION:	North Beach neighborhood CUP - Alcoholic beverage establishments (not also operating as a full restaurant with a full kitchen, serving full meals)

CONTACTS	Name	Company	Address
Applicant	Gus manessis		800 West Ave Ph42 Ph42 Miami Beach, FL 33139
Owner	Gus manessis	Black Cat Cigar Hookah lounge	

Plan Review	Version: 1	Date Received: 04/10/2023	Date Completed: 04/21/2023
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1. Planning Department Review - Fail Alejandro Garavito Ph: email: AlejandroGaravito@miamibeachfl.gov
- Comments: Staff First Submittal Review Comments:
 Comments Issued: 4-21-23 | AG - RAM
 Tentative PB Meeting Date: June PB hearing
1. Please see Administrative comments for Final submittal requirements (CSS and Paper), If you have any question on this please contact. Miriam Herrera.
ACKNOWLEDGED
 2. Provide a narrative response when addressing the following comments with page(s) location if applicable.
PROVIDED
 3. Checklist: page number 3 is missing, provide the complete document signed and dated.
PROVIDED
 4. LOI: for clarification, please delete any reference to PA primary zone 6400... from property appraiser, instead, mention that the property is located in the CD-2 Zoning district (Commercial Medium Intensity) within the North Beach neighborhood, And per Section 142-303 (c)(1) of the City Code, alcoholic beverage establishments (not also operating as a full restaurant with a full kitchen, serving full meals); requires a Conditional Use Permit. Revise description of the property and review criteria answer #3 (your venue is not a Neighborhood Impact Establishment see CMB code section 142-1361).
CORRECTED
 5. LOI: clarify on the LOI that the establishment will be selling alcohol (wine and beer only?).
CORRECTED
 6. LOI: do not modify the questions on CUP review criteria. (remove property appraiser info),
CORRECTED
 7. LOI: Delete the Neighborhood Impact Establishment review criteria. Some of the information provided can be transferred to the operational plan if applicable.
CORRECTED
 8. Operational plan: clarify where is the garbage storage, provide the location on the site plan.
PROVIDED
 9. Check list item 11: Plans shall be set up on 11x17 format, not 36x24, print a set and make sure all text, dimensions are legible. Some text on charts and drawings are illegible when printed. Pages shall be organized in the same sequence as checklist items 11 a to q as applicable.
CORRECTED
 10. Check list item 11b, the survey shall also be included on the plan set
PROVIDED
 11. Check list item# 11h, provide a site plan showing the rear area, show the location of garbage containers or storage,
PROVIDED
 12. Check list item# 11j: missing.
PROVIDED

These comments have been provided as a preliminary review of outstanding issues and are subject to additions and/or deletions pending further review before the meeting date and during building permit review. These comments do not constitute final zoning comments or final zoning approval of the project.
 Please provide the above information for Final submittal by May 01, before 12:00 pm. Provide a narrative and label electronic files as: 'MM-DD-YYYY Document Name'.