MIAMI BEACH

Planning Department, 1700 Convention Center Drive, 2^{ND} Floor Miami Beach, Florida 33139, www.miamibeachfl.gov 305-673-7550

LAND USE BOARD HEARING APPLICATION

THE FOLLOWING APPLICATION IS SUBMITTED FOR REVIEW AND CONSIDERATION OF THE PROJECT DESCRIBED HEREIN BY THE LAND USE BOARD SELECTED BELOW. A SEPARATE APPLICATION MUST BE COMPLETED FOR EACH BOARD REVIEWING THE PROPOSED PROJECT.

| D BOAHD OF ADJUSTMENT |
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| ☐ VARIANCE FROM A PROVISION OF THE LAND DEVELOPMENT REGULATIONS |
| APPEAL OF AN ADMINISTRATIVE DECISION |
| |
| 🔀 DESIGN REVIEW BOARD |
| □ DESIGN REVIEW APPROVAL |
| VARIANCE RELATED TO PROJECT BEING CONSIDERED OR APPROVED BY DRB. |
| HISTORIC PRESERVATION BOARD |
| ☐ CERTIFICATE OF APPROPRIATENESS FOR DESIGN |
| CERTIFICATE OF APPROPRIATENESS TO DEMOLISH A STRUCTURE |
| HISTORIC DISTRICT / SITE DESIGNATION |
| ☐ VARIANCE RELATED TO PROJECT BEING CONSIDERED OR APPROVED BY HPB. |
| |
| ☐ PLANNING BOARD |
| CONDITIONAL USE PERMIT |
| LOT SPLIT APPROVAL |
| AMENDMENT TO THE LAND DEVELOPMENT REGULATIONS OR ZONING MAP |
| ☐ AMENDMENT TO THE COMPREHENSIVE PLAN OR FUTURE LAND USE MAP |
| _ |
| L FLOOD PLAIN MANAGEMENT BOARD |
| ☐ FLOOD PLAIN WAIVER |
| _ |
| OTHER |
| |
| SUBJECT PROPERTY ADDRESS: 2055 HIDISWS Dr., Miami Beach Fl. |
| |
| |
| LEGAL DESCRIPTION: PLEASE ATTACH LEGAL DESCRIPTION AS "EXHIBIT A" |
| (1) 22 12222 226 0220 (11(11) |
| FOLIO NUMBER (S) 02-3232-005-0220 Creference) |
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| De | mmary of Application - provide Brief, scope of project: | | and |
|--|---|---|---|
| COI | 16 th chian of a new two story resident | ial buildi | <u>ng.</u> |
| | | | |
| 44 | . IS THERE AN EXISTING BUILDING(S) ON THE SITE | YES | No |
| 4E | B. DOES THE PROJECT INCLUDE INTERIOR OR EXTERIOR DEMOLITION | YES | NO |
| | . PROVIDE THE TOTAL FLOOR AREA OF THE NEW BUILDING (IF APPLICABLE) | 1979 | SQ. FT. |
| 4D. PROVIDE THE TOTAL GROSS FLOOR AREA OF THE NEW BUILDING (INCLUDING REQUIRED PARKING AND ALL | | | |
| | USEABLE FLOOR SPACE). 4,790 sqf. | SQ | . FT. |
| | | | |
| 6 | A SEPARATE DISCLOSURE OF INTEREST FORM MUST BE SUBMITTED W | /ITH THIS APPLIC | CATION IF THE |
| 6 | A SEPARATE DISCLOSURE OF INTEREST FORM MUST BE SUBMITTED WAPPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER | | |
| 9 | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER ALL APPLICABLE AFFIDAVITS MUST BE COMPLETED AND THE PROPERTY OWN | SHIP OR TRUSTEE NER MUST COMPL | ETE AND SIGN |
| | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER | SHIP OR TRUSTEE NER MUST COMPL | ETE AND SIGN |
| | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER ALL APPLICABLE AFFIDAVITS MUST BE COMPLETED AND THE PROPERTY OWN | SHIP OR TRUSTEE NER MUST COMPL | ETE AND SIGN |
| | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER ALL APPLICABLE AFFIDAVITS MUST BE COMPLETED AND THE PROPERTY OWN THE "POWER OF ATTORNEY" PORTION OF THE AFFIDAVIT IF THEY WILL NOT OR IF OTHER PERSONS ARE SPEAKING ON THEIR BEHALF. TO REQUEST THIS MATERIAL IN ALTERNATE FORMAT, SIGN LANGUAGE INTER | SHIP OR TRUSTEE NER MUST COMPL BE PRESENT AT ERPRETER (FIVE-I | E. LETE AND SIGN THE HEARING, DAY NOTICE IS |
| • | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER. ALL APPLICABLE AFFIDAVITS MUST BE COMPLETED AND THE PROPERTY OWN THE "POWER OF ATTORNEY" PORTION OF THE AFFIDAVIT IF THEY WILL NOT OR IF OTHER PERSONS ARE SPEAKING ON THEIR BEHALF. TO REQUEST THIS MATERIAL IN ALTERNATE FORMAT, SIGN LANGUAGE INTEREQUIRED), INFORMATION ON ACCESS FOR PERSONS WITH DISABILITIES, AN | SHIP OR TRUSTEE NER MUST COMPI BE PRESENT AT ERPRETER (FIVE-I | E. LETE AND SIGN THE HEARING, DAY NOTICE IS ON TO REVIEW |
| • | APPLICANT OR OWNER IS A CORPORATION, PARTNERSHIP, LIMITED PARTNER ALL APPLICABLE AFFIDAVITS MUST BE COMPLETED AND THE PROPERTY OWN THE "POWER OF ATTORNEY" PORTION OF THE AFFIDAVIT IF THEY WILL NOT OR IF OTHER PERSONS ARE SPEAKING ON THEIR BEHALF. TO REQUEST THIS MATERIAL IN ALTERNATE FORMAT, SIGN LANGUAGE INTER | SHIP OR TRUSTEE NER MUST COMPL BE PRESENT AT ERPRETER (FIVE—I ID ACCOMMODATI S, CALL 305.60 | E. LETE AND SIGN THE HEARING, DAY NOTICE IS ON TO REVIEW 04.2489 AND |

PLEASE READ THE FOLLOWING AND ACKNOWLEDGE BELOW:

- APPLICATIONS FOR ANY BOARD HEARING(S) WILL NOT BE ACCEPTED WITHOUT PAYMENT OF THE REQUIRED FEE. ALL CHECKS ARE TO BE MADE PAYABLE TO THE "CITY OF MIAMI BEACH".
- PUBLIC RECORDS NOTICE ALL DOCUMENTATION, SUBMITTED FOR THIS APPLICATION IS CONSIDERED A
 PUBLIC RECORD SUBJECT TO CHAPTER 119 OF THE FLORIDA STATUTES AND SHALL BE DISCLOSED UPON
 REQUEST.
- IN ACCORDANCE WITH THE REQUIREMENTS OF SECTION 2-482 OF THE CODE OF THE CITY OF MIAMI BEACH, ANY INDIVIDUAL OR GROUP THAT WILL BE COMPENSATED TO SPEAK OR REFRAIN FROM SPEAKING IN FAVOR OR AGAINST A PROJECT BEING PRESENTED BEFORE ANY OF THE CITY'S LAND USE BOARDS, SHALL FULLY DISCLOSE, PRIOR TO THE PUBLIC HEARING, THAT THEY HAVE BEEN, OR WILL BE COMPENSATED. SUCH PARTIES INCLUDE: ARCHITECTS, LANDSCAPE ARCHITECTS, ENGINEERS, CONTRACTORS, OR OTHER PERSONS RESPONSIBLE FOR PROJECT DESIGN, AS WELL AS AUTHORIZED REPRESENTATIVES ATTORNEYS OR AGENTS AND CONTACT PERSONS WHO ARE REPRESENTING OR APPEARING ON BEHALF OF A THIRD PARTY; SUCH INDIVIDUALS MUST REGISTER WITH THE CITY CLERK PRIOR TO THE HEARING.
- IN ACCORDANCE WITH SEC.118-31. DISCLOSURE REQUIREMENT. EACH PERSON OR ENTITY REQUESTING APPROVAL, RELIEF OR OTHER ACTION FROM THE PLANNING BOARD, DESIGN REVIEW BOARD,

| FILE NO | |
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OWNER AFFIDAVIT FOR INDIVIDUAL OWNER

| STATE OF COUNTY OF | |
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| | materials, are true and correct to the best of my re this application may be publicly noticed and implete and all information submitted in support Miami Beach to enter my property for the sole as required by law. (5)/I am responsible for SIGNATURE |
| GLADYS E CACERES NOTARY SEAL OR STAMPAN My Comm. Expires Jan 25, 2019 Ommission # FF 164737 My Commission Expires | Clady = Cacves PRINT NAME |
| ALTERNATE OWNER AFFIE CORPORATION, PARTNERSHIP, OR LIMIT (Circle one) STATE OF | The second secon |
| I, | rporate entity). (2) I am authorized to file this d all information submitted in support of this materials, are true and correct to the best of point is the owner or tenant of the property that the that, before this application may be publicly ation must be complete and all information by authorize the City of Miami Beach to enter of Public Hearing on the property, as required |
| | SIGNATURE |
| Sworn to and subscribed before me this day of,207 of as identification and/or is personally known to me and who did/did not take an oath | The foregoing instrument was acknowledged before me by, on behalf of such entity, who has produced i. |
| NOTARY SEAL OR STAMP: | |
| My Commission Evriron | NOTARY PUBLIC |
| My Commission Expires: | PRINT NAME |
| | EILE NIO |

POWER OF ATTORNEY AFFIDAVIT

| TOWER OF ATTORNET ATTIBATE | | | | |
|--|---|--|--|--|
| STATE OF | | | | |
| COUNTY OF | | | | |
| I, | theBoard. (3) I also hereby sole purpose of posting a Notice of | | | |
| PRINT NAME (and Title, if applicable) | SIGNATURE | | | |
| Sworn to and subscribed before me this 15 day of January, 20 18. The fo by Joe Come Sang of identification and/or is personally known to me and who did/did not take an oath. NOTARY SEAL OR STAMP | regoing instrument was acknowledged before me who has produced as | | | |
| My Commission Expires GLADYS E CACERES Notary Public - State of Florida My Comm. Expires Jan 25, 2019 Commission # FF 164737 | NOTARY PUBLIC Clady S Caceres PRINT NAME | | | |
| | | | | |
| CONTRACT FOR PURCHASE | | | | |
| If the applicant is not the owner of the property, but the applicant is a party to a contract to purchase the property, whether or not such contract is contingent on this application, the applicant shall list the names of the contract purchasers below, including any and all principal officers, stockholders, beneficiaries, or partners. If any of the contract purchasers are corporations, partnerships, limited liability companies, trusts, or other corporate entities, the applicant shall further disclose the identity of the individual(s) (natural persons) having the ultimate ownership interest in the entity. If any contingency clause or contract terms involve additional individuals, corporations, partnerships, limited liability companies, trusts, or other corporate entities, list all individuals and/or corporate entities.* | | | | |
| NAME | DATE OF CONTRACT | | | |
| NAME, ADDRESS, AND OFFICE | % OF STOCK | | | |
| | | | | |
| | | | | |
| In the event of any changes of ownership or changes in contracts for purchase, subsequent to the date that this application is filed, but prior to the date of a final public hearing, the applicant shall file a supplemental disclosure of interest. | | | | |
| | EILE NIO | | | |

CITY OF MIAMI BEACH DEVELOPMENT REVIEW BOARD APPLICATION

DISCLOSURE OF INTEREST

| NAME OF CORPORATE ENTITY | |
|--------------------------|----------------|
| | OF OWNERS UP |
| NAME AND ADDRESS | % OF OWNERSHIP |
| | |
| | |
| | |
| | |
| | |
| NAME OF CORPORATE ENTITY | |
| NAME AND ADDRESS | % OF OWNERSHIP |
| | |
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| 3. <u>COMPENSATED LOBBYIST:</u> Pursuant to Section 2-482 of the Miami Beach City Code, all lobbyists shall, before engaging in any lobbying activities, register with the City Clerk. Please list below any and all persons or entities retained by the applicant to lobby City staff or any of the City's land development boards in support of this application. | | | | |
|--|---|--|--|--|
| NAME | ADDRESS PHONE # | | | |
| a. John Richard Medine of Associata. b. c. | 4901 SW 75 AncHiamiFl (3) 740.0554 | | | |
| Additional names can be placed on a separate page attached to this form. | | | | |
| *Disclosure shall not be required of any entity, the equity interests in which are regularly traded on an established securities market in the United States or other country, or of any entity, the ownership interests of which are held in a limited partnership or other entity, consisting of more than 5,000 separate interests, where no one person or entity holds more than a total of 5% of the ownership interests in the entity. | | | | |
| DEVELOPMENT BOARD OF THE CITY SHALL BE SUB | ES THAT (1) ANY APPROVAL GRANTED BY A LAND JECT TO ANY AND ALL CONDITIONS IMPOSED BY SUCH JICTION, AND (2) APPLICANT'S PROJECT SHALL COMPLY D ALL OTHER APPLICABLE CITY, STATE, AND FEDERAL | | | |
| APPLICANT AFFIDAVIT | | | | |
| STATE OF | | | | |
| COUNTY OF | | | | |
| Joe Comesana, being first duly sworn, depose and certify as follows: (1) I am the applicant, or the representative of the applicant. (2) This application and all information submitted in support of this application, including disclosures, sketches, data, and other supplementary materials, are true and correct to the best of my knowledge and belief. | | | | |
| Sworn to and subscribed before me this 2 day of February , 20 18. The foregoing instrument was acknowledged before me by, who has produced as identification and/or is personally known to me and who did/did not take an oath. | | | | |
| My Commission Expires: OGLADYS E CA Notary Public - Sta My Comm. Expires Commission # | Jan 25, 2019 FF 164737 Glady & Caceres | | | |
| WIY COMMINSSION EXPINES. | PRINT NAME | | | |

FILE NO._____