

PLANNING DEPARTMENT

City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139

File No:	
Date:	
MCR No: _	
Amount:	
Zoning Cla	ssification
_ (For Staff Use Only)

STANDARD APPLICATION FORM DEVELOPMENT REVIEW BOARD HEARING
1. The below listed applicant wishes to appear before the following City Development Review Board for a scheduled public hearing: NOTE: This application form must be completed separately for <u>each</u> applicable Board hearing a matter.
() BOARD OF ADJUSTMENT () HISTORIC PRESERVATION BOARD ★ DESIGN REVIEW BOARD () PLANNING BOARD () FLOOD PLAIN MANAGEMENT BOARD
NOTE: Applications to the Board of Adjustment will not be heard until such time as the Design Review Board, Historic Preservation Board and/or the Planning Board have rendered decisions on the subject project.
2. THIS REQUEST IS FOR: a.
3. NAME & ADDRESS OF PROPERTY: 790 LAKEVIEW DR., MIAMI BEACH, FL 33140 LEGAL DESCRIPTION: LOT 9 AND THE WEST 1/2 OF LOT 10, BLOCK 30 OF RECORDED LAKEVIEW.
ACCORPINE TO THE PLAT THEPEOF, ACCORDING AS RECORDED IN PLAT BOOK 14 AT
PAGE 42, OF THE PUBLIC RECORDS OF MIAMI-DADE COUNTY, FLORIDA
4. NAME OF APPLICANT 790 LAKEVIEW LLC
Note: If applicant is a corporation, partnership, limited partnership or trustee, a separate Disclosure of Interest Form (Pages 6-7) must be completed as part of this application.
1300 BRICKELL BAY DRIVE, SUITE 400 MIAMI FL 33131 ADDRESS OF APPLICANT CITY STATE ZIP
BUSINESS PHONE # 305-938 5707 CELL PHONE #
E-mail address: HHERNANDEZ @ NEWGARDGROUP. COM

	If the owner of the property is not the applicant a (Page 4) must be filled out and signed by th partnership, limited partnership or trustee, a se	e property owner. In addition, it	g, the Owner/Power the property owns	er is a corporation	t
	ADDRESS OF PROPERTY OWNER	CITY	STATE	ZIP	
	BUSINESS PHONE #	CELL PHONE #			
	E-mail address:				_
6.				BLE FOR PROJEC	T DESIGN
	DOMO ARCHITECTURE + DESINAME (please circle one of the above)	,			
	BUSINESS PHONE # (305) 674 8031	CELL PHONE #			
	E-mail address: ROBERT @ DOMODES				
7.	NAME OF AUTHORIZED REPRESENTATIVE(S), ATTO	PRNEY(S), OR AGENT(S) AND/OR	CONTACT PERSON:		
	a. NAME ADDRESS				
				STATE	ZIP
	BUSINESS PHONE #			···· · · · · · · · · · · · · · · · · ·	
	E-mail address:				<u>_</u>
	bADDRESS	CITY	STATE	ZIP	· · · · · · · · · · · · · · · · · · ·
	BUSINESS PHONE #				
	E-mail address:				-
	cADDRESS	CITY	STATE	ZIP	
	BUSINESS PHONE #	CELL PHONE #			
	E-mail address:				
DE RE	TE: ALL ARCHITECTS, LANDSCAPE ARCHITECTS, E SIGN, AS WELL AS AUTHORIZED REPRESENTATI PRESENTING OR APPEARING ON BEHALF OF A THIR REGISTER AS A LOBBYIST WITH THE CLERK, <u>PRIO</u>	VE(S), ATTORNEY(S), OR AGENT DPARTY, UNLESS SOLELY APPE	T(S) AND/OR CONT ARING AS AN EXPER	'ACT PERSONS. V	VHO ARE
	SUMMARY OF PROPOSAL: DEMOLITION (OF EXISTING PRE-194	Z TWO STO	DRY STRUCT	ure_
8.	AND CONSTRUCTION OF A NEW	TWO STORY SINGL	E FAMILY 1	RESIDENCE	E WITH
	THE POST PROPERTY OF THE PARTY				

9. IS THERE AN EXISTING BUILDING(S) ON THE SITE? YES (X) NO ()	
10. WILL ALL OR ANY PORTION OF THE BUILDING(S) INTERIOR AND/OR EXTERIOR, BE DEMOLISHED? MYES [] NO	
11. TOTAL FLOOR AREA (FAR) OF NEW BUILDING (if applicable): N/A	SQ. FT
12. TOTAL GROSS FLOOR AREA OF NEW BUILDING (including required parking and all usable floor space)	SQ. F1
13. TOTAL FEE: (to be completed by staff) \$ 9μυμ SF	

PLEASE NOTE THE FOLLOWING:

- Applications for any Board hearing(s) will not be accepted without payment of the required fee. All checks are to be made payable to: "City of Miami Beach."
- <u>Public records notice</u>: all documentation, application forms, maps, drawings, photographs, letters and exhibits will become a part of the public record maintained by the City of Miami Beach Planning Department and shall under Florida Statute, be disclosed upon proper request to any person or entity.
- In accordance with the requirements of Section 2-482 of the Code of the City of Miami Beach, any individual or group (Lobbyist) that has been, or will be, compensated to either speak in favor or against a project being presented before any of the City's Development Review Boards, shall be fully disclosed prior to the public hearing. All such individuals and/or groups must register with the City Clerk <u>prior</u> to the hearing.
- In accordance with Section 118-31 of the Code of the City of Miami Beach, all applicants shall, prior to the public hearing, fully disclose any consideration provided or committed, directly or on its behalf, for an agreement to support or withhold objection to the requested approval, relief or action (exclusive of all legal or professional design services). Such disclosure shall:

 - Indicate to whom the consideration has been provided or committed. Generally describe the nature of the consideration.

 - Be read into the record by the requesting person or entity prior to submission to the secretary/clerk of the respective board.

In the event the applicable development review board determines that the foregoing disclosure requirement was not timely satisfied by the person or entity requesting approval, relief or other action as provided above, then the application or order, as applicable, shall immediately be deemed null and void without further force or effect, and no application from said person or entity for the subject property shall be reviewed or considered by the applicable board(s) until expiration of a period of one year after the nullification of the application or order. It shall be unlawful to employ any device, scheme or artifice to circumvent the disclosure requirements of this section and such circumvention shall be deemed a violation of the disclosure requirements of this section.

When the applicable Boards reach a decision, a Final Order will be issued stating the Board's decision and any conditions imposed therein. The Final Order must be recorded in the Office of the Recorder of Miami-Dade County; the original shall remain on file with the board clerit/secretary. Under no circumstances will a building permit be issued by the City of Miami Beach without a copy of the recorded Final Order being tendered along with the construction plans.

To request this material in accessible format, sign language interpreters, information on access for persons with disabilities, and/or any accommodation to review any document or participate in any city-sponsored proceeding, please contact 305-604-2489 (voice) or 305-673-7218 (TTY) five days in advance to initiate your request. TTY users may also call 711 (Florida Relay Service).

PLEASE COMPLETE ONE OR MORE OF THE FOLLOWING THREE AFFIDAVITS, AS APPLICABLE. NOTE: THE PROPERTY OWNER MUST FILL OUT AND SIGN THE "POWER OF ATTORNEY" PORTION IF THEY WILL NOT BE PRESENT AT THE HEARING, OR IS HAVING OTHER PERSONS SPEAK ON THEIR BEHALF.

OWNER AFFIDAVIT FOR INDIVIDUAL OWNER

STATE OF	
COUNTY OF	
I, HARVET HERNANDEZ, being first duly swom, depose and matter of the proposed hearing; that all the answers to the questions in this app and made a part of the application are true and correct to the best of my know accurate before a hearing can be advertised. I also hereby authorize the City NOTICE OF PUBLIC HEARING on my property as required by law and I take	lication and all sketches data and other supplementary matter attached to wledge and belief. I understand this application must be completed and of Miami Beach to enter my property for the sole purpose of posting a
PRINT NAME	SIGNATURE
	, 20 The foregoing instrument was acknowledged before me by entification and/or is personally known to me and who did/did not take an
oath.	
NOTARY SEAL OR STAMP	NOTARY PUBLIC
My Commission Expires:	PRINT NAME
ALTERNATE OWNER CORPORATION or	PARTNERSHIP
STATE OF FLORIDA (Circle of Country of Mia mi-Dadl	ne)
, , , , , , , , , , , , , , , , , , , ,	
	described herein and is the subject matter of the proposed hearing. We an be advertised. I also hereby authorize the City of Miami Beach to enter
HARVEY HERNANDEZ. PRINT NAME	SIGNATURE
Sworn to and subscribed before me this 25 day of AUQUITHER AND OF FOLOR	, 20 16 The foregoing instrument was acknowledged before me by
as identification and/or is personally known to me and who did/did not take an NOTARY SEAL OR STAMP:	
AND THE MORE BOSTON	Maria Roman NOTARY PUBLIC
Commission / GCOMMING	PRINT NAME

POWER OF ATTORNEY AFFIDAVIT STATE OF FLOVIDA COUNTY OF MIAMI-DADE I, HARVEY HERNANDEY, , being duly sworn and deposed say that I am the owner or representative of the owner of the described real property and that I am aware of the nature and effect of the request for NEW CONSTRUCTION relative to the subject property, which request is hereby made by me OR I am hereby authorizing DOMO ARCHITECTURE + DESIGNA before the DESIGN REVIEW Board. I also hereby authorize the City of Miami Beach to enter the subject property for the sole purpose of posting a NOTICE OF PUBLIC HEARING on the property as required by law and I take the responsibility of removing this notice after the date of hearing. PRINT NAME (and Title, if applicable) SIGNATURE Sworn to and subscribed before me this 2010. The foregoing instrument was acknowledged before me by 40 Lakevie w LLC who has produced 110016 as identification and/or is personally known to me and who did/did not take an oath. NOTARY SEAL OR STAMP **NOTARY PUBLIC** PRINT NAME My Commission Expires

CONTRACT FOR PURCHASE

If there is a CONTRACT FOR PURCHASE, whether contingent on this application or not, and whether the purchaser is a corporation, trustee or
partnership, list the names of the contract purchasers below, including the principal officers, stockholders, beneficiaries or partners. Where the principal
officers, stockholders, beneficiaries or partners consist of another corporation, trust, partnership or other similar entity, further disclosure shall be required
which discloses 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 or trusts, list all individuals and/or complete the appropriate disclosure clause above.*

NAME	DATE OF CONTRACT
NAME, ADDRESS, AND OFFICE	% OF STOCK
	1

For any changes of ownership or changes in contracts for purchase subsequent to the date of the application, but prior to the dates of final public hearing, a supplemental disclosure of interest shall be filed.

CITY OF MIAMI BEACH DEVELOPMENT REVIEW BOARD APPLICATION

DISCLOSURE OF INTEREST

1. CORPORATION	PORATION
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If the property which is the subject of the application is owned or leased by a CORPORATION, list ALL of the stockholders, and the percentage of stock owned by each. Where the stockholders consist of another corporation(s), trustee(s), partnership(s) or other similar entity, further disclosure shall be required which discloses the identity of the individual(s) (natural persons) having the ultimate ownership interest in the entity.*

CORPORATION NAME	
NAME AND ADDRESS 790 LAKEVIEW LLC 1800 BRICKELL BAY DRIVE SWITE 400	% OF STOCK
MIAMI, FLORIDA 33131	
CORPORATION NAME	
NAME AND ADDRESS	% OF STOCK
	••••

IF THERE ARE ADDITIONAL CORPORATIONS, LIST OTHERS, INCLUDING CORP. NAME(S) AND EACH INDIVIDUAL STOCKHOLDER'S NAME, ADDRESS, OFFICE AND PERCENTAGE OF STOCK, ON A SEPARATE PAGE.

NOTE: Notarized signature required on page 8

CITY OF MIAMI BEACH DEVELOPMENT REVIEW BOARD APPLICATION

DISCLOSURE OF INTEREST

2.	TR	US	TE	ΞΕ

TRUST NAME	
NAME AND ADDRESS	% OF STOCK
	• • • • • • • • • • • • • • • • • • • •
PARTNERSHIP/LIMITED PARTNERSHIP he property which is the subject of the application is owned or le	ased by a PARTNERSHIP or LIMITED PARTNERSHI
PARTNERSHIP/LIMITED PARTNERSHIP he property which is the subject of the application is owned or le principals of the partnership, including general and limited part rporation(s), trust(s) or other similar entity, further disclosure sha atural persons) having the ultimate ownership interest in the en	ners. Where the partner(s) consist of another partnershall be required which discloses the identity of the individ
he property which is the subject of the application is owned or le e principals of the partnership, including general and limited part rporation(s), trust(s) or other similar entity, further disclosure sha	ners. Where the partner(s) consist of another partnershall be required which discloses the identity of the individ

NOTE: Notarized signature required on page 8

4. COMPENSATED LOBBYIST	4.	COL	MPEN	SATE	D LOBE	BYIST:
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The City of Miami Beach Code sub-section 118-31 requires the disclosure of any individual or group which has been, or will be, compensated to either speak in favor of or against a project being presented before any of the City's Development Review Boards, or not to speak at all. Please list below all persons or entities encompassed by this section.

NAME			ADDRESS			PHONE #	
a. ROBERT	MOEHRING	420	LINCOLN RD S. 50	96	MIAMI BEACH	FL 33139	305-674-8031
b							7
C	STHOMOUVER		SA THE SHIP OF THE				
Additional names can be placed on a separate page attached to this form.							
* Disclosure shall not be required of any entity, the equity interest 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 and where no one person or entity holds more than a total of 5% of the ownership interests in the limited partnership or other entity.							
TO ANY AND ALL	CONDITIONS IMP	OSED BY SUCH	APPROVAL GRANTED BY BOARD AND BY ANY OTHI OF THE CITY OF MIAMI BE	ER B	OARD HAVING JUR	ISDICTION, AN	D THAT THE
			APPLICANT AFFIDAVIT				
STATE OF FIC	orida ami-pade						
the applicant, or the re all sketches, data and	epresentative of the apport of the apport of the properties of the properties of the apport of the a	olicant, for the sub natter attached to	of corporation and office designation ject matter of the proposed hear and made a part of the applicating ue and correct to the best of my	ring; t on an	that all the answers to the disclosure information whedge and belief.	he questions in thi	s application and
Sworn to and subscr HAIV LY HEING	ibed before me this <u>i</u> nd <u>@</u> who has produ	25 day of Aced license	as identification and/o	The f	oregoing instrument were consulty known to ple	/as acknowledge and who did/did r	d before me by not take an oath.
NOTARY SEAL OR S	STAMP	Maria Roman Commission # G600			Maria	Roman	OTARY PUBLIC
My Commission Expir	es:	Expires: August 14, 2 Bonded thru Agron N					PRINT NAME

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