MIAMIBEACH

PLANNING DEPARTMENT

1700 Convention Center Drive, Miami Beach, Florida 33139; Tel: 305.673.7550; Web: www.miamibeachfl.gov/planning

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.

Application Informa	tion					
FILE NUMBER						
HPB22-0505						
		Design Review Board Design review approval Variance				
C	Planning Board		Historic Preservation Board			
Conditional use perm	-		Certificate of Appropriateness for design			
Lot split approval			Certificate of Appropriateness for demolition			
	nd Development Regulation		Historic district/sit	e designation		
	omprehensive Plan or future	land use map	□ Variance			
Other:	n – Please attach Legal	Description	//E.LiLia A//			
ADDRESS OF PROPERTY		Description as				
2100 Collins Ave, Miami	Beach, FL 33139					
FOLIO NUMBER(S)						
02-3226-001-0370						
Property Owner Info						
PROPERTY OWNER NA	ME					
City of Miami Beach						
ADDRESS CITY				STATE	ZIPCODE	
1700 Convention Center Drive Miami Bea		ch	FL	33139		
BUSINESS PHONE	CELL PHONE	EMAIL AD	DRESS			
305-673-7071						
Applicant Information (if different than owner)						
APPLICANT NAME	in an electric man ow	iner j				
City of Miami Beach						
		CITY		STATE	ZIPCODE	
		-ch				
	00 Convention Center Drive Miami Beach FL 33139			33139		
BUSINESS PHONE	CELL PHONE	EMAIL AD	DRESS			
305-673-7071						
Summary of Reques	t					
PROVIDE A BRIEF SCOP	E OF REQUEST					
	ing approval for the interior					
Rotunda. The addition of	a new restroom facility an	id with new access	s ramp and stair to exi	sting building		

Project Information			6		
Is there an existing building		🔳 Yes	🗆 No		
Does the project include inte		□ Yes	🔳 No		
Provide the total floor area	of the new construction.			2,855	SQ. FT.
Provide the gross floor area	of the new construction (inclu	uding required p	parking and all u	sable area). 3,655	SQ. FT.
Party responsible for p	roject design				
NAME		Architect	Contractor	🗆 Landscape Arch	nitect
		Engineer	🗆 Tenant	Other	
ADDRESS		CITY		STATE	ZIPCODE
MC Harry and Associates		Miami		FL	33133
BUSINESS PHONE	CELL PHONE	EMAIL ADDR	ESS		
305-445-3765		lfeingberg@m	charry.com		
Authorized Representa	tive(s) Information (if ap	plicable)			
NAME		□ Attorney	Contact		
David Martinez		□ Agent	□ Other		
ADDRESS		CITY		STATE	ZIPCODE
1700 Convention Center Dri	ve	Miami Beach		FL	33139
BUSINESS PHONE	CELL PHONE	EMAIL ADDRI	ESS		
305-673-7071		davidmartinez	@miamibeachfl	gov	
NAME		□ Attorney	Contact		
Colette Satchell		□ Agent	□ Other		
ADDRESS		CITY		STATE	ZIPCODE
1700 Convention Center Dri	ve	Miami Beach		FL	33139
BUSINESS PHONE	CELL PHONE	EMAIL ADDR	ESS	1	
305-673-7071		ColetteSatche	ell@miamibeach	l.gov	
NAME	k	□ Attorney	Contact		
Rodney Perez		□ Agent	□ Other		
ADDRESS		CITY		STATE	ZIPCODE
1700 Convention Center Drive		Miami Beach		FL	33139
BUSINESS PHONE	CELL PHONE	EMAIL ADDRI	ESS		
305-673-7071		rodneyperez@	miamibeachfl.g	ov	

Please note the following information:

- A separate disclosure of interest form must be submitted with this application if the applicant or owner is a corporation, partnership, limited partnership or trustee.
- All applicable affidavits must be completed and the property owner must complete and sign the "Power of Attorney" portion of the affidavit if they will not be present at the hearing, or if other persons are speaking on their behalf.
- To request this material in alternate format, sign language interpreter (five-day notice is required), information on access for persons with disabilities, and accommodation to review any document or participate in any City sponsored proceedings, call 305.604.2489 and select (1) for English or (2) for Spanish, then option 6; TTY users may call via 711 (Florida Relay Service).

Please read the following and acknowledge below:

- Applications for any board hearing(s) will not be accepted without payment of the required fees. 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 an application 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, engineers, landscape architects, 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 Section 118-31. Disclosure Requirement. Each person or entity requesting approval, relief or other action from the Planning Board, Design Review Board, Historic Preservation Board or the Board of Adjustment shall disclose, at the commencement (or continuance) of the public hearing(s), 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, excluding from this requirement consideration for legal or design professional service rendered or to be rendered. The disclosure shall: (I) be in writing, (II) indicate to whom the consideration has been provided or committed, (III) generally describe the nature of the consideration, and (IV) be read into the record by the requesting person or entity prior to submission to the secretary/clerk of the respective board. Upon determination by the applicable board that the forgoing disclosure requirement was not timely satisfied by the person or entity requesting approval, relief or other action as provided above, then (I) the application form 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.
- When the applicable board reaches a decision a final order will be issued stating the board's decision and any
 conditions imposed therein. The final order will be recorded with the Miami-Dade Clerk of Courts. The original board
 order shall remain on file with the City of Miami Beach Planning Department. Under no circumstances will a building
 permit be issued by the City of Miami Beach without a copy of the recorded final order being included and made a part
 of the plans submitted for a building permit.

The aforementioned is acknowledged by:

Owner of the subject property Π uthorized representative SIGNATURE

Lester Sola, Assistant City Manager

PRINT NAME 02 16/2022

OWNER AFFIDAVIT FOR INDIVIDUAL OWNER

STATE OF _____

COUNTY OF _____

I, ______, being first duly sworn, depose and certify as follows: (1) I am the owner of the property that is the subject of this application. (2) This application and all information submitted in support of this application, including sketches, data, and other supplementary materials, are true and correct to the best of my knowledge and belief. (3) I acknowledge and agree that, before this application may be publicly noticed and heard by a land development board, the application must be complete and all information submitted in support thereof must be accurate. (4) I also hereby authorize the City of Miami Beach to enter my property for the sole purpose of posting a Notice of Public Hearing on my property, as required by law. (5) I am responsible for remove this notice after the date of the hearing.

						SIGNAT	URE
Sworn to and subscribed before me this	_ day of		, 20_	The	foregoing	instrument	was
acknowledged before me by		, wh	o has	produced			as
identification and/or is personally known to me a	nd who did/	'did not take an oc	ıth.				
NOTARY SEAL OR STAMP							

My Commission Expires: _____

PRINT NAME

NOTARY PUBLIC

ALTERNATE OWNER AFFIDAVIT FOR CORPORATION, PARTNERSHIP OR LIMITED LIABILITY COMPANY

STATE OF Florida

COUNTY OF Miami Dade

I, Lester Sola, being first	duly sworn, depose and certify as follows: (1) I am the
Assistant City Manager (print title) of City of Miami E	Beach (print name of corporate entity). (2) I am
authorized to file this application on behalf of such entity. (3	3) This application and all information submitted in support of this
application, including sketches, data, and other supplemen	tary materials, are true and correct to the best of my knowledge
and belief. (4) The corporate entity named herein is the ow	wher of the property that is the subject of this application. (5) I
acknowledge and agree that, before this application may b	be publicly noticed and heard by a land development board, the
application must be complete and all information submitted	in support thereof must be accurate. (6) I also hereby authorize
	urpose of posting a Notice of Public Hearing on my property, as
required by law. (7) I am responsible for remove this notice	after the date of the hearing.
	VIII Deal
1614	SIGNATURE SIGNATURE
Sworn to and subscribed before me this 16 ¹¹⁷ day of _ acknowledged before me by <u>LESTER SOLA</u>	, 20 22. The foregoing instrument was
acknowledged before me by LESTER SOLA	, who has produced as
identification and/or is personally known to me and who di	d/did not take an oath.
	Xytha
NOTARY SEAL OR STAMP	
Commission State o	Florida
My Commission Expires: 06 00 Commission #H S	LUIGI MOLINA
	PRINT NAME

We are committed to providing excellent public service and safety to all who live, work, and play in our vibrant, tropical, historic community.

POWER OF ATTORNEY AFFIDAVIT

STATE OF Florida

COUNTY OF Miami Dade

I, Lester Sola	_, being first duly sworn	, depose and certify a	s follows: (1) I am the owner or
representative of the owner of the real MC Harry and Associates to be my re			
authorize the City of Miami Beach to enter			
property, as required by law. (4) I am respo			
Lester Sola, Assistant City Manager	_	M	and
PRINT NAME (and Title, if applicable)			SIGNATURE
Sworn to and subscribed before me this acknowledged before me by	SOVA	, who has proc	The foregoing instrument was luced as
identification and/or is personally known to	me and who did/did not	take an oath.	. 0
NOTARY SEAL OR STAMP	LUIGI MOLINA tary Public - State of Florida Commission # HH 5730 Comm. Expires Jun 1, 2024 Inrough National Notary Assn.		NOTARY PUBLIC
My Commission Expires: 06/01/2024			LUIGI MOLINSA
			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 contact purchasers are corporations, partnerships, limited liability companies, trusts, or other corporate entities, the applicant shall further disclose the identity of the individuals(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.

DATE OF CONTRACT
% OF STOCK

In the event of any changes of ownership or changes in contracts for purchase, subsequent to the date that this application if filed, but prior to the date of a final public hearing, the applicant shall file a supplemental disclosure of interest.

DISCLOSURE OF INTEREST CORPORATION, PARTNERSHIP OR LIMITED LIABILITY COMPANY

If the property that is the subject of the application is owned or leased by a corporation, partnership or limited liability company, list ALL of the owners, shareholders, partners, managers and/or members, and the percentage of ownership held by each. If the owners consist of one or more corporations, partnerships, trusts, partnerships 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.

NAME OF CORPORATE ENTITY	
NAME AND ADDRESS	% OF OWNERSHIP
	-
NAME OF CORPORATE ENTITY	
NAME AND ADDRESS	% OF OWNERSHIP

If there are additional corporate owners, list such owners, including corporate name and the name, address and percentage of ownership of each additional owner, on a separate page.

DISCLOSURE OF INTEREST TRUSTEE

If the property that is the subject of the application is owned or leased by a trust, list any and all trustees and beneficiaries of the trust, and the percentage of interest held by each. If the owners consist of one or more corporations, partnerships, trusts, partnerships 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.

TRUST NAME	
NAME AND ADDRESS	% INTEREST
°	

COMPENSATED LOBBYIST

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
Additional names can be placed on a separate p	age attached to this application	

APPLICANT HEREBY ACKNOWLEDGES AND AGREES THAT (1) AN APPROVAL GRANTED BY A LAND DEVELOPMENT BOARD OF THE CITY SHALL BE SUBJECT TO ANY AND ALL CONDITIONS IMPOSED BY SUCH BOARD AND BY ANY OTHER BOARD HAVING JURISDICTION, AND (2) APPLICANT'S PROJECT SHALL COMPLY WITH THE CODE OF THE CITY OF MIAMI BEACH AND ALL OTHER APPLICABLE CITY, STATE AND FEDERAL LAWS.

APPLICANT AFFIDAVIT

STATE OF Florida

COUNTY OF Miami Dade

I, <u>Lester Sola</u>, being first duly sworn, depose and certify as follows: (1) I am the applicant or representative of the applicant. (2) This application and all information submitted in support of this application, including sketches, data, and other supplementary materials, are true and correct to the best of my knowledge and belief.

	SIGNATURE
Sworn to and subscribed before me this <u>1674</u> day of acknowledged before me by <u>LESTEP SOLA</u>	FERMARY , 2022. The foregoing instrument was
identification and/or is personally known to me and who d	lid/did not take an oath.
NOTARY SEAL OR STAMP	NOTARY PUBLIC
My Commission Expires: 06/01/2024	LUIGI MOLINA
	PRINT NAME