

MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
<http://www.miamidade.gov/building/home.asp>
8/9/2019 3:30:49 PM

Tracking #	Process #	Permit #
3219016761	M2019016761	2019072821

THIS COPY OF PLANS MUST BE AVAILABLE ON BUILDING SITE OR AN INSPECTION WILL NOT BE MADE.

Process #	Review	Disposition	Reviewer	Date
M2019016761	DERM CORE	A	VALLE, MARIA	7/11/2019
M2019016761	IMPACT FEES	A	SYSTEM)IFS), INTERNET IMPACT FEES	8/8/2019
M2019016761	DERM PAVING & DRAINAGE	A	CHEN, CHI-RUEY	7/12/2019
M2019016761	UPFRONT FEES	A	WEB APPLICATION ID	7/9/2019
M2019016761	WASA	A	RODRIGUEZ, ARMANDO	8/7/2019

Disclaimer.

Subject to compliance with all Federal, State, and County Laws, rules and regulations. Miami-Dade County assumes no responsibility for accuracy of or results of these plans.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to the property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.

Stamp Name	Trade	Disposit ion	Stamp Description
Approved	DERM	A	Approved



7/11/2019

Issued Date: 7/11/2019

F71LLC
PO BOX 22577
HIALEAH,, FL 33002

Lidia Cabrera
, FL

RE: Sanitary Sewer Certification of Adequate Capacity

The Miami-Dade County Department of Regulatory and Economic Resources (RER) has received your application for approval of additional sewer flows for the following project which is more specifically described in the attached project summary.

Project Name: New Single Family Residence / M2019016761
Project Location: 16036 NW 89 CT, MIAMI LAKES, FL
Previous Use: Vacant Land
Proposed Use: 2,531 SF - New Single Family Residence
Previous Flow: 0 GPD
Total Calculated Flow: 210 GPD
Allocated Flow (additional sewer flows): 210 GPD
Sewer Utility: UNINCORPORATED DADE COUNTY
Receiving Pump Station: 30 - 1326

RER has evaluated your request in accordance with the terms and conditions set forth in Appendix A of the Consent Decree (CASE No. 1:12-CV-24400-FAM) between the United States of America and Miami-Dade County. RER hereby certifies that adequate treatment and transmission capacity is available for the above described project, pursuant to the criterion stipulated in Appendix A of said Consent Decree.

Furthermore, be advised that this approval does not constitute departmental approval for the proposed project and is subject to the terms and conditions set forth in the Consent Decree. Additional reviews and approvals may be required from other sections having jurisdiction over specific aspects of this project. Also, be advised that the gallons per day (GPD) flow determination indicated herein are for sewer allocation purposes only (in compliance with the Consent Decree requirements) and may not be representative of GPD flows used in calculating connection fees by the utility providing the service.

Be advised that this Sanitary Sewer Certification of Adequate Capacity (this letter) will expire within 90 days of the issue date if the applicant does not obtain a building process number from the corresponding building official. However, if the building process number has already been obtained, this letter will expire within 180 days of the expiration date of the process number. Finally, if a Building Permit was secured for this project, this letter will expire within 150 days of the expiration date of the Building Permit.

Should you have any questions regarding this matter, please contact the Miami-Dade Permitting and Inspecting Center (MDPIC) (786) 315-2800 or RER Office of Plan Review Services, Downtown Office (305) 372-6789.

Sincerely,

Lee N. Hefty
Director of Environmental Resources Management

For/By: _____
Cristian Guerrero, P.E., Chief of Environmental Plan Review.
Department of Regulatory and Economic Resources.

Miami Dade County Department of Regulatory And Economic Resources - Job Copy

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2019-ALLOCATION-02355-CERT2-07112019.pdf

Sanitary Sewer Certification of Adequate Capacity Project Summary:

Owner's Name: F71LLC
Owner's Address: PO BOX 22577
HIALEAH,, FL 33002

EEOS Allocation Number: 2019-ALLOCATION-02355

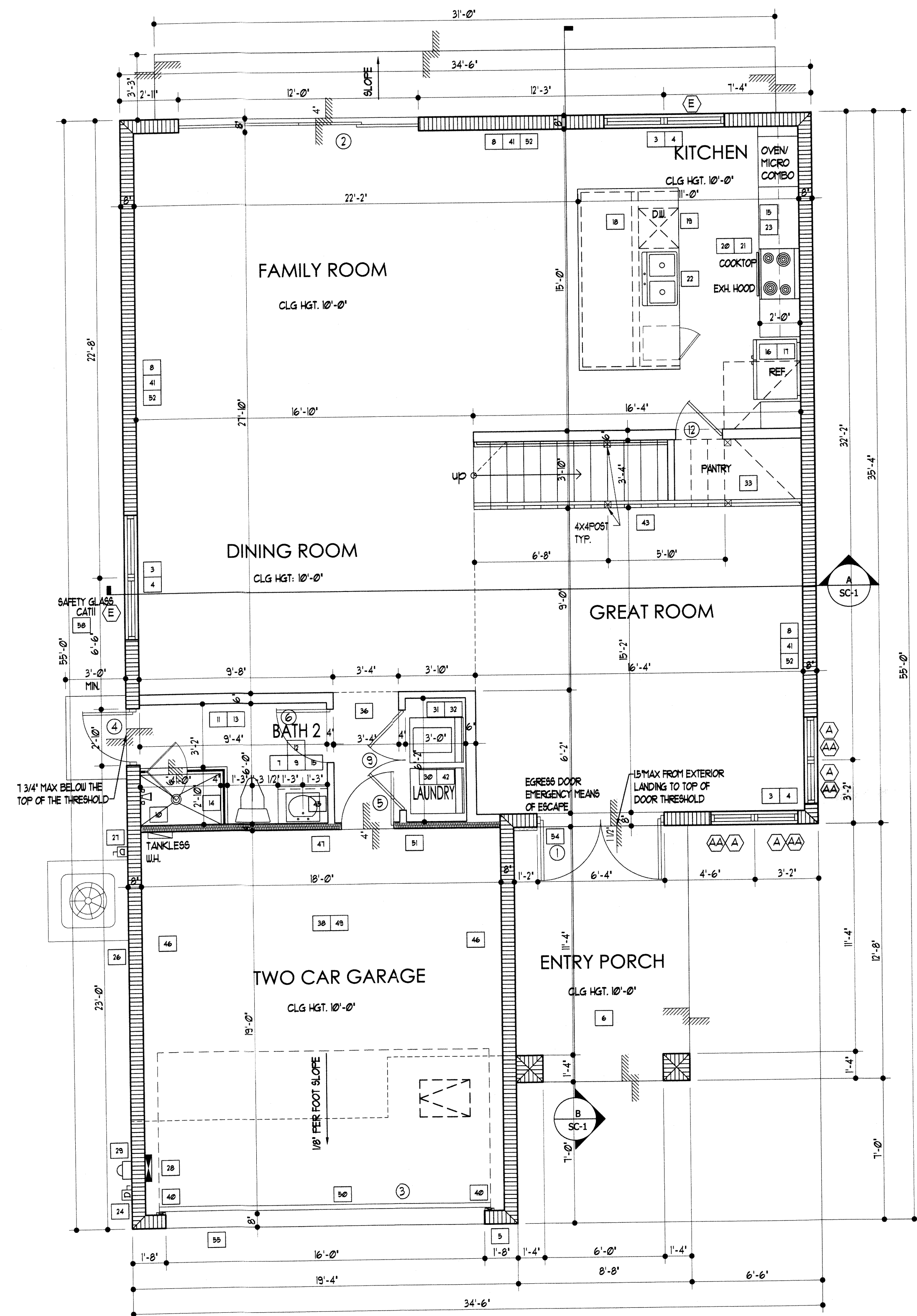
Project: New Single Family Residence / M2019016761

Proposed Use: 2,531 SF - New Single Family Residence

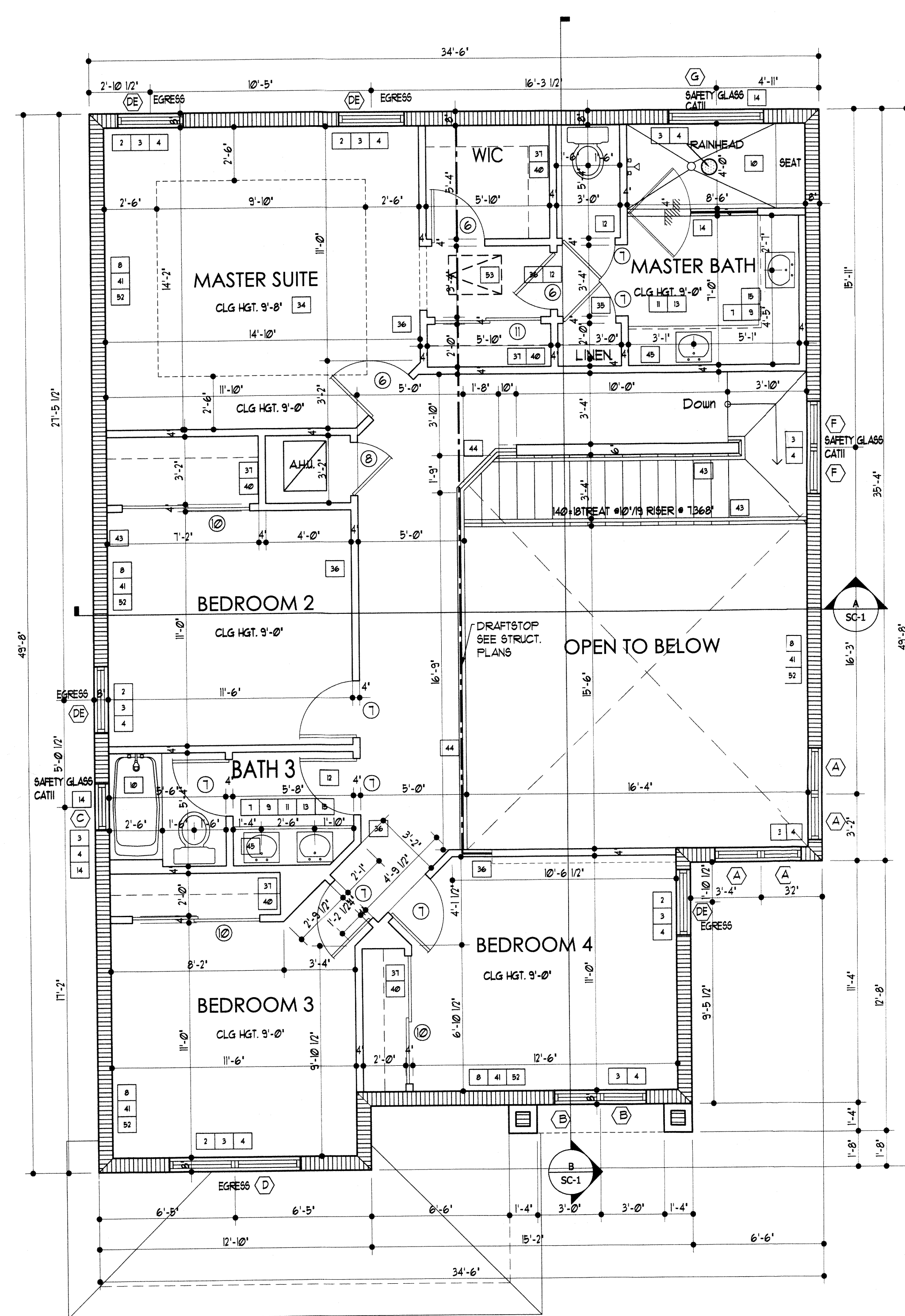
Pump Station: 30-1326
Projected NAPOT: 1.41
Proposed Projected NAPOT: 1.42

Folio	Lot/Block Bldg Proc #	Address	Flow (GPD)	Sewer Status	Sewer Cert Date	Sewer Recert Date	Exp. Date
3220160050780	4/3 BLR 2019-2034	16036 NW 89 CT	210	APP	7/11/2019		
Total:			210 GPD				

Miami Dade County Department of Regulatory And Economic Resources - Job Copy
3219016761 - 8/9/2019 3:30:49 PM
2019-ALLOCATION-02355-CERT2-07112019.pdf



FIRST FLOOR PLAN - MODEL 2536



SECOND FLOOR PLAN - MODEL 2536

SQUARE FOOTAGE CALCS

FIRST FLOOR LIVING AREA:	1219 SQFT.
SECOND FLOOR LIVING AREA:	1312 SQFT.
TOTAL LIVING AREA:	2531 SQFT.
GARAGE:	380 SQFT.
ENTRY PORCH:	110 SQFT.
TOTAL BUILDING AREA:	3021 SQFT.

ISSUANCE FOR

☐ BIDDING ☐ CONSTRUCTION ☐ PERMIT

REV1
REV2
REV3
REV4

AFTIX SEAL HERE

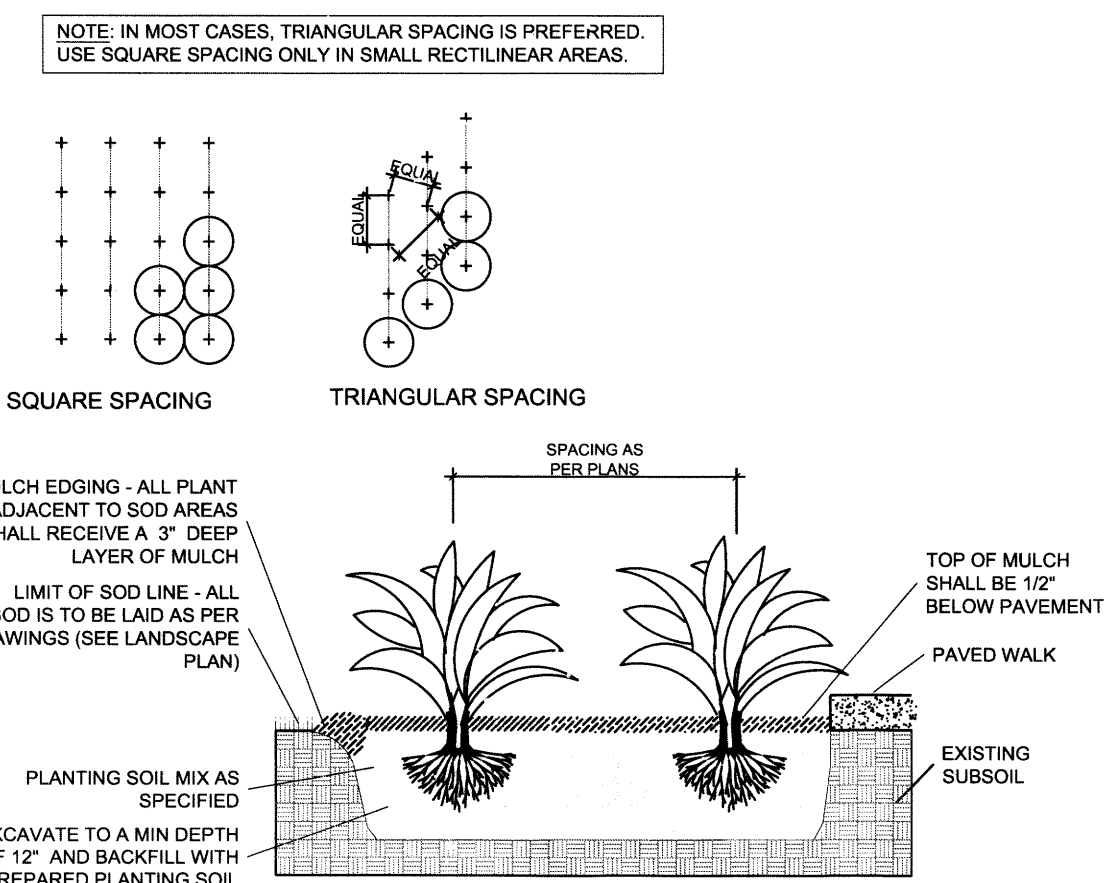
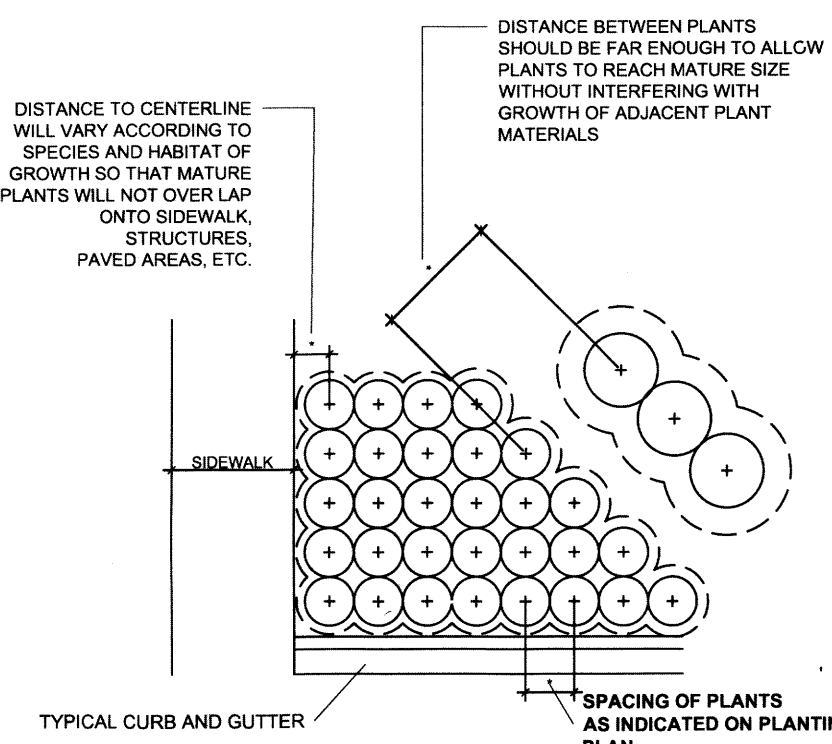
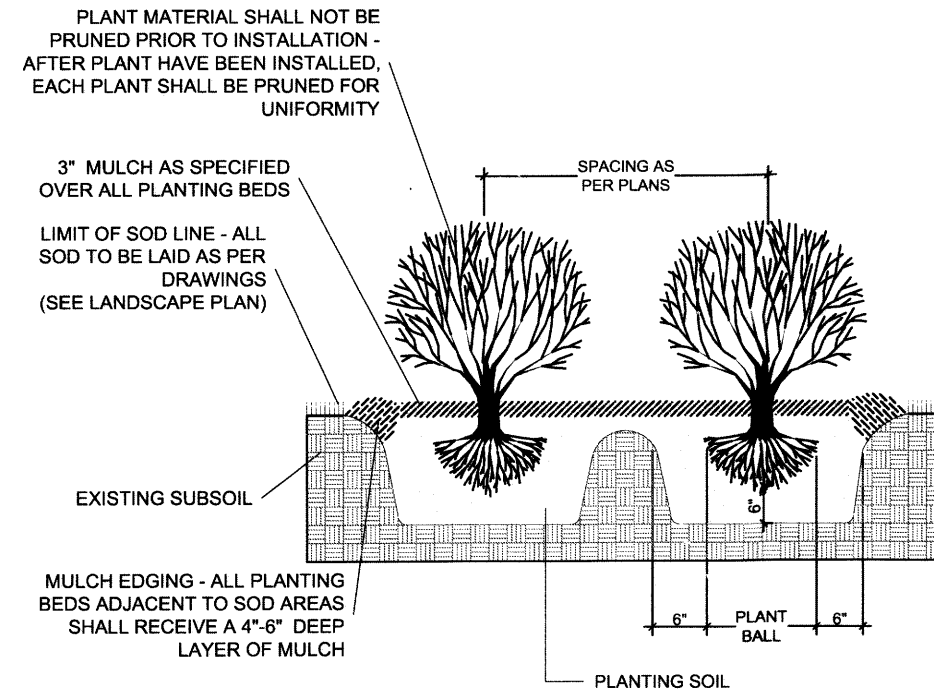
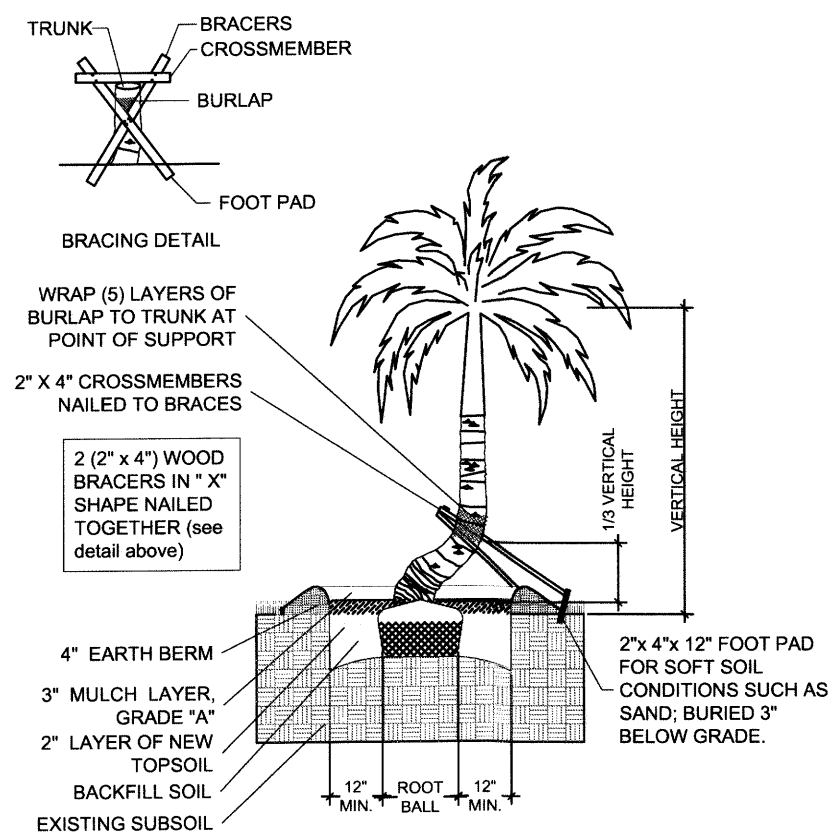
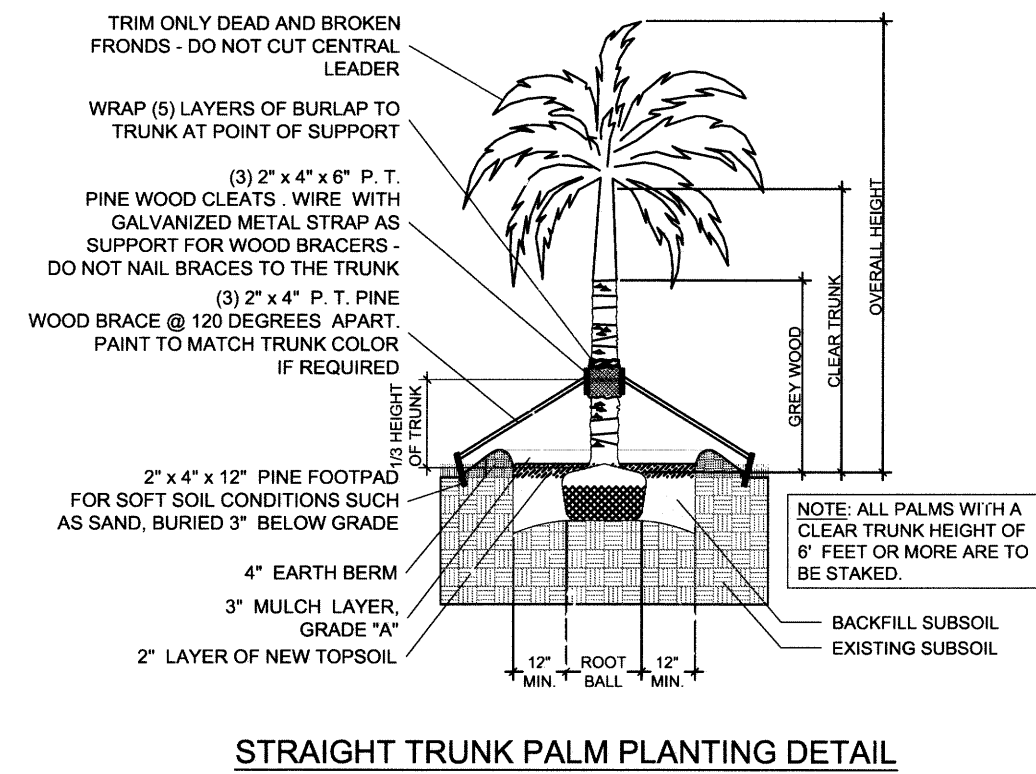
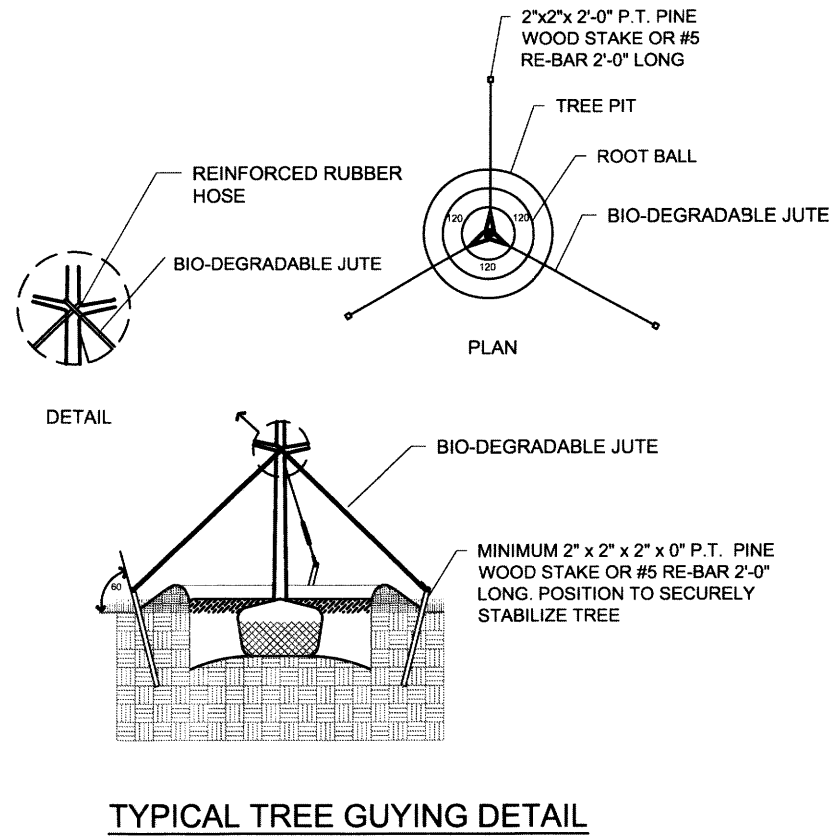
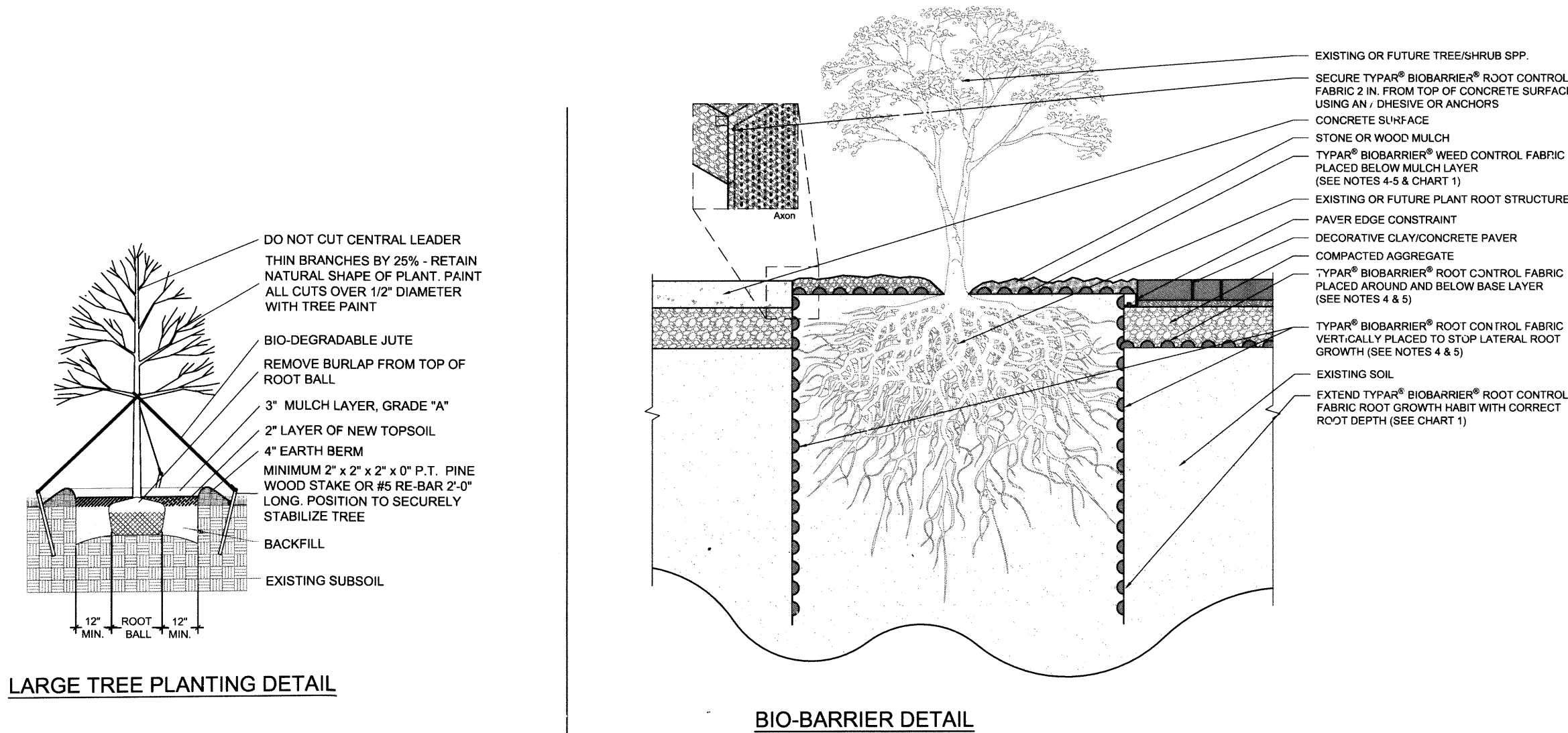
Client: LENNAR HOMES
Address: 730 NW 107TH AVENUE, 3RD FLOOR
Address: MIAMI, FLORIDA 33172
Phone: 305-559-1951
Plan: DUNNWOODY LAKES- MODEL 2536
FLOOR PLAN

Job No.:
Drawn By: 1/4"=1'-0"
Scale: 02.02.18
Date:
Lot:
Block:

EDWARD SILVA, ARCHITECT
REG. No. 0011131
8900 SW 117 AVE #B107, MIAMI, FLORIDA 33186
(305) 275-8383 / FAX - (305) 275-8381

A-1

of



PLANTING NOTES:

- All plant material is to be Florida Number 1 or better pursuant to the Florida Department of Agriculture's Grades and Standards for Nursery Plants.
- All plants are to be top dressed with a minimum 3" layer of Melaleuca mulch, Eucalyptus mulch or equal.
- Planting plans shall take precedence over plant list in case of discrepancies.
- No changes are to be made without the prior consent of the Landscape Architect and Owner. Additions and or deletions to the plant material must be approved by the project engineer.
- Landscape Contractor is responsible for providing their own square footage takeoffs and field verification for 100% sod coverage for all areas specified.
- All landscape areas are to be provided with automatic sprinkler system which provide 100% coverage, and 50% overlap.
- All trees in lawn areas are to receive a 24" diameter mulched saucer at the base of the trunk.
- Trees are to be planted within parking islands after soil is brought up to grade. Deeply set root balls are not acceptable.
- Planting soil for topsoil and backfill shall be 50/50 mix, nematode free. Planting soil for annual beds to be comprised of 50% Canadian peat moss, 25% salt free coarse sand and 25% Aerolite.
- Tree and shrub pits will be supplemented with "Agriform Pells", 21 gram size with a 20-10-5 analysis, or substitute application accepted by Landscape Architect. Deliver in manufacturer's standard containers showing weight, analysis and name of manufacturer.

SOD NOTES:

- Sod is to be grade "A" weed free.
- All areas marked "LAWN" shall be solid sodded with St. Augustine 'Floritam' solid sod. See limit on plan. All areas marked 'Bahia Grass' shall be solid sodded with Paspalum.
- Provide a 2" deep blanket of planting soil as described in planting notes this sheet. Prior to planting, remove stones, sticks, etc. from the sub soil surface. Excavate existing non-conforming soil as required so that the finish grade of sod is flush with adjacent pavement or top of curb as well as adjacent sod in the case of sod patching.
- Place sod on moistened soil, with edges tightly butted, in staggered rows at right angles to slopes.
- Keep edge of sod bed a minimum of 18" away from groundcover beds and 24" away from edge of shrub beds and 36" away from trees, measured from center of plant.
- Sod Shall be watered immediately after installation to uniformly wet the soil to at least 2" below the bottom of the sod strips.
- Excavate and remove excess soil so top of sod is flush with top of curb or adjacent pavement or adjacent existing sod.

GENERAL NOTES:

- The Landscape Contractor is to locate and verify all underground and overhead utilities prior to beginning work. Contact proper utility companies and / or General Contractor prior to digging for field verification. The Owner and the Landscape Architect shall not be responsible for any damages to utility or irrigation lines (see Roadway Plans for more utility notes).
- Landscape Contractor is to verify all current drawings and check for discrepancies and bring to the attention of the Landscape Architect prior to commencing with the work.
- All unattended and unplanted tree pits are to be properly barricaded and flagged during installation.
- All planting plans are issued as directives for site layout. Any deviations, site changes, etcetera are to be brought to the attention of the Landscape Architect for clarification prior to installation.

WITKIN HULTS DESIGN GROUP

307 south 21st avenue
hollywood, florida
phone 954.923.9661 fax 954.923.9689
www.witkindesign.com

Dunnwoody Lake

Miami Lakes, Florida

LANDSCAPE DETAILS

Project:

Revisions:

Seal:

Lic. # LA0000889
Member: A.S.L.A.

Drawing: Landscape Details
Date: 12/19/2016
Scale: NTS
Drawn by: TGW
Sheet No.:
L-2
Cad Id.: 2015-107

Lydia cabrerz @catpermitprocessing.com

NOTE: ALL SHEET MUST BE REVIEWED
MIAMI-DADE COUNTY DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES

Herbert S. Saffir Permitting and Inspection Center
11805 SW 26th Street (Coral Way) • Miami, Florida 33175-2474 • (786) 315-2000

APPLICATION FOR MUNICIPAL PERMIT APPLICANTS
THAT REQUIRE PLAN REVIEW FROM MIAMI-DADE FIRE RESCUE
AND/OR ENVIRONMENTAL SERVICES

M2019016761 3219016761 3272019-2834

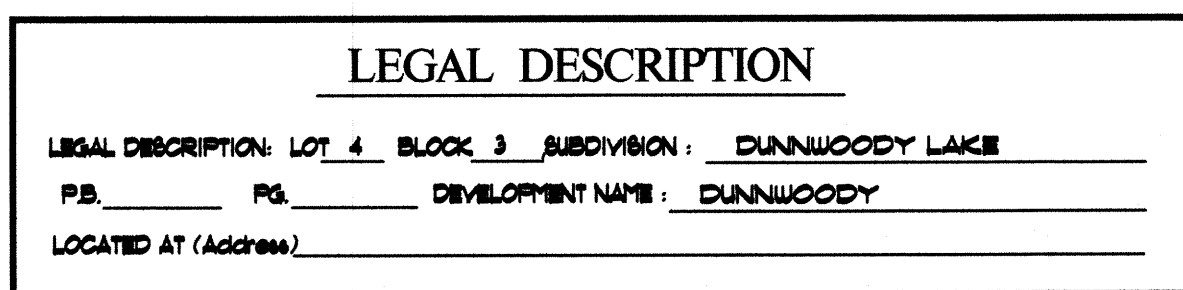
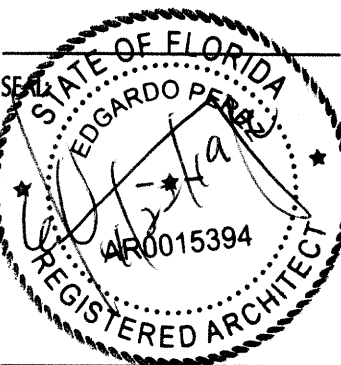
PROVIDE MUNICIPAL PROCESS NUMBER HERE			
LOCATION OF IMPROVEMENTS	Job Address <u>16036 NW 89th</u>		CONTRACTOR INFORMATION
	Folio <u>32-2014 005 0780</u>		
TYPE OF IMPROVEMENTS	Lot <u>4</u> Block <u>3</u>		Contractor No. <u>DRYRUN</u>
	Subdivision <u>Dunn Woody Lakes</u> PBpg. _____		
PERMIT TYPE	Metes and bounds _____		Last four (4) digits of Qualifier No. _____
	[☒] New Construction on Vacant Land		
PERSON TO PICK UP PLANS	[☐] Alteration Interior		Contractor Name <u>DRYRUN</u>
	[☐] Alteration Exterior		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	[☐] Relocation of Structure		Qualifier Name _____
	[☐] Enclosure		
OPTIONAL PLAN REVIEW (OPR)	[☐] Repair		Address _____
	[☐] Repair Due to Fire		
REVIEW STATUS	[☐] Demolish		City _____ State _____ Zip _____
	[☐] Shell Only		
OWNER'S NAME	[☐] Addition Attached		Current use of property <u>VACANT</u>
	[☐] Addition Detached		
ARCHITECT / ENGINEER	[☐] Re-Roof		Description of Work <u>New SFR</u>
	[☐] Foundation Only		
PERSON TO PICK UP PLANS	[☐] Tent		Sq. Ft. <u>3021</u> Units _____ Floors _____
	[☒] MBLD* Category <u>02</u>		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	[☐] MELE _____		Value of Work <u>245 456.00</u>
	[☐] MLPG _____		
OPTIONAL PLAN REVIEW (OPR)	[☐] MMEC _____		Owner <u>LENNAR HOMES</u>
	[☐] FIRE _____		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	[☐] Chg. Contractor		Address <u>730 NW 107TH AVE</u>
	[☐] Re-Issue		
OPTIONAL PLAN REVIEW (OPR)	[☐] Re-Stamp		City <u>MIAMI</u> State <u>FL</u> Zip _____
	[☐] Revision		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	[☐] Not Applicable for Fire		Phone <u>786-348-3251</u>
	[☐] Not Applicable for Fire		
OPTIONAL PLAN REVIEW (OPR)	Name <u>CAT PERMIT PROCESSING INC.</u>		Last four (4) digits of Owner's Social Security No. _____
	Address <u>18973 SW 33RD COURT</u>		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	City <u>MIRAMAR</u> State <u>FL</u> Zip <u>33029</u>		Owner _____
	Phone <u>786-348-3251</u>		
OPTIONAL PLAN REVIEW (OPR)	Address _____		Address _____
	City _____ State _____ Zip _____		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	Phone _____		City _____ State _____ Zip _____
	I am requesting a Special Request Plan Review (SRI) to be scheduled as soon as possible at the rate of \$190 for the first hour and \$65 per each additional hour in addition to the review fees. Minimum charge one-hour.		
OPTIONAL PLAN REVIEW (OPR)	1st Request: _____ Date: _____		Phone _____
	2nd Request: _____ Date: _____		
FIRE SPECIAL REQUEST PLAN REVIEW (SRI)	3rd Request: _____ Date: _____		I am requesting Optional Plan Review (OPR) to be scheduled as soon as possible at the rate of \$75 for each discipline. Additional review fees may apply.
	1st Request: _____ Date: _____		
OPTIONAL PLAN REVIEW (OPR)	2nd Request: _____ Date: _____		3rd Request: _____ Date: _____
	3rd Request: _____ Date: _____		

Miami Dade County Department of Regulatory And Economic Resources - Job Copy

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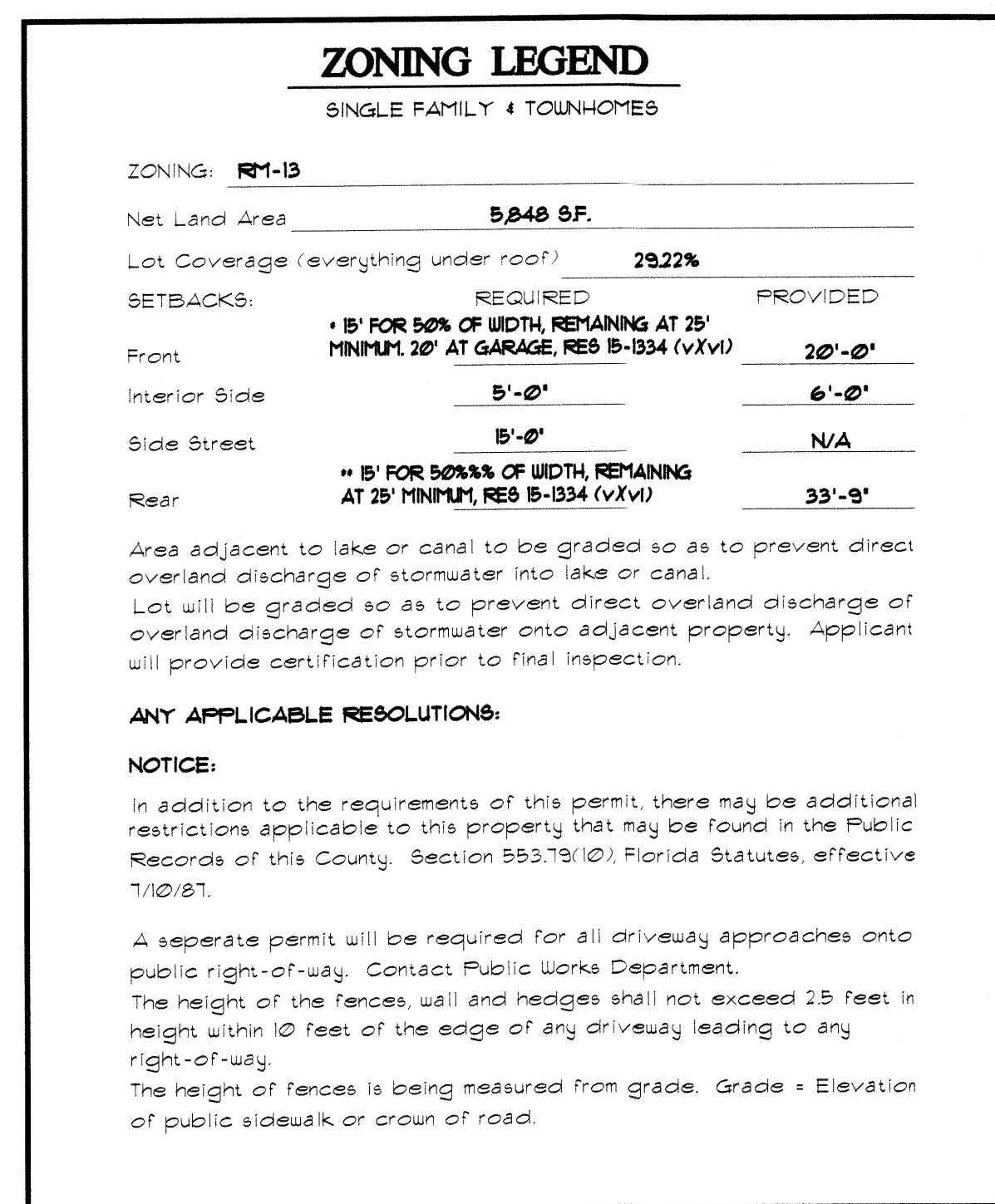
123_01-192 6/13

MDC Permit Application.pdf



FLOOD INFORMATION	
FLOOD ZONE:	"X"
PANEL NUMBER :	III of 1231
MAP NUMBER :	12086C0111L
DATE :	SEPT. 11, 2009
BASE FLOOD ELEV.:	+6.00
PROPOSED FF. ELEV.:	+9.41'
PROP. A/C PAD ELEV.	+9.41'
PROPOSED GARAGE ELEV.	+8.93'
HIGHEST ELEV. OF ROAD	+7.80'
HIGHEST BACK OF SIDEWALK ELEV.	+7.82'

LOMR-F Case No: 16-04-6236A

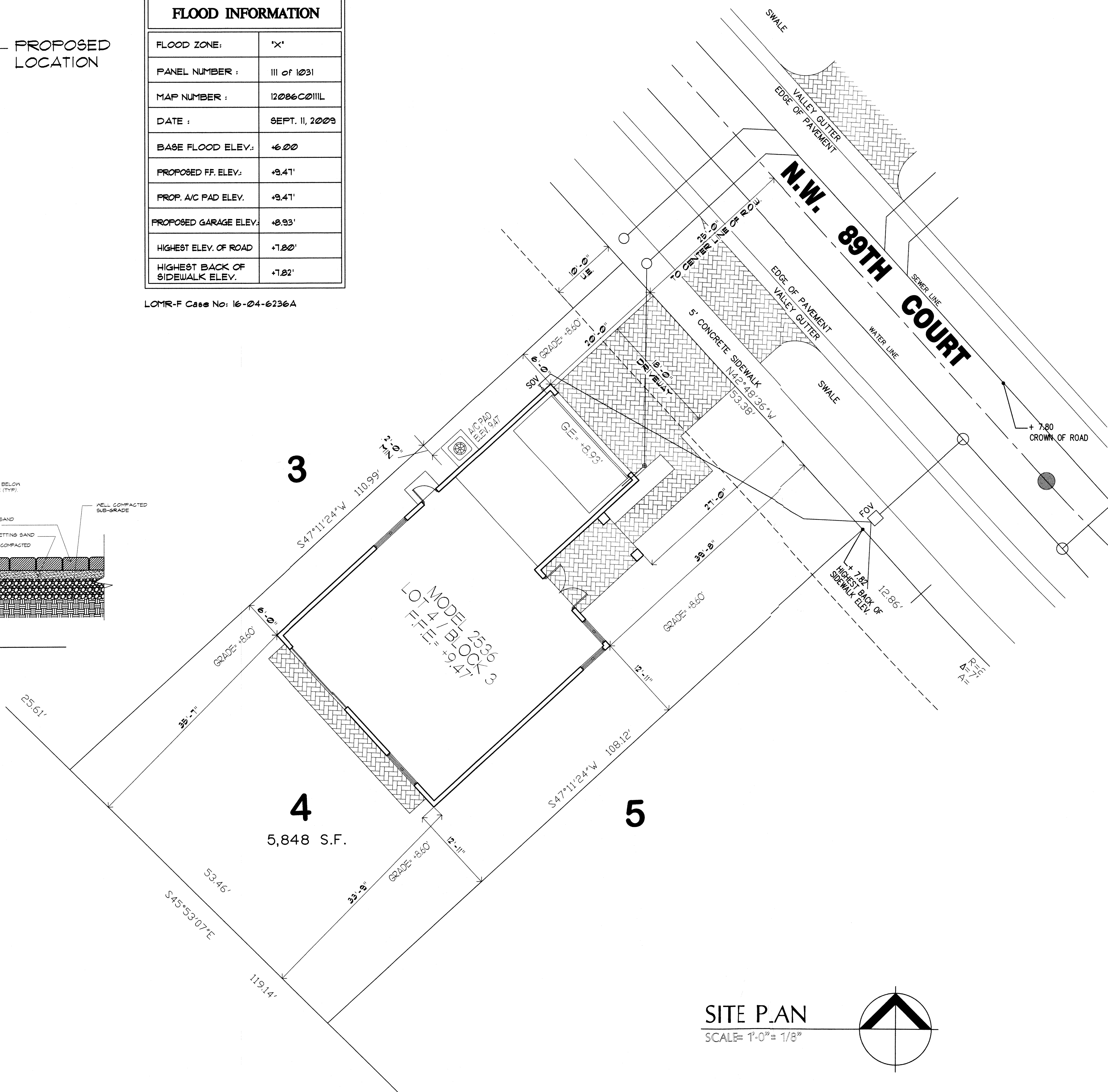
PAVERS
NOT TO SCALE

NOTE:

This Plot Plan has been prepared for the specific purpose of showing setbacks and utilities access in order to obtain a building permit.

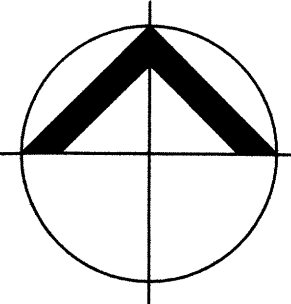
The exact location of the building within the lot lines shall be measured from a layout drawing prepared by a certified surveyor.

NOTE:
LOT LINE DIMENSIONS, BEARINGS AND LOT AREA INFORMATION PROVIDED
HEREON IS FOR INFORMATIONAL PURPOSES ONLY. FOR ENGINEERS, INC. ONLY
9 PM
CROWN OF THE ROAD ELEVATION IS BASED ON PAVING AND DRAINAGE
PLANS PREPARED BY SRS ENGINEERING, INC.
FIELD CONDITIONS SHALL PREVAIL ON THE FIELD.



SITE PLAN

SCALE= 1'-0" = 1/8"



Lennar/DunnWoody Lakes SFR 50s

Lot	Blk	Address	Model	Permit #	Process #
113587	04	03	16036 NW 89 CT	2536	BLR2019-2834C M201901676

JOB COPY

BLR2019-2834

16036 NW 89 CT

Master Permit BLR2019-0623

TOWN OF MIAMI LAKES

THIS COPY OF PLANS MUST BE AVAILABLE ON BUILDING SITE OR NO INSPECTION

SECTION	APPROVED		DATE	BY
	BY	DATE		
ZONING				
LANDSCAPING				
PUBLICWORKS				
BUILDING				
UTILITIES				
HANDICAP				
STRUCTURAL				
ELECTRICAL				
PLUMBING				
MECHANICAL				
ENERGY				
FIRE				

Subject to compliance with all applicable codes and regulations of the Town of Miami Lakes. This permit is not valid unless the plans are approved by the Town of Miami Lakes. The Town of Miami Lakes is not responsible for the accuracy of the plans. NOTING: In addition to the restrictions of the permit, the restrictions applicable to this plan are public record of the county and town.



Address: 16036 NW 89 CT
Folio #: 32-20160050780
MDC Process #: m2019016761
MDC Tracking #: 3219016761
Job Description: LENNAR SFR MODEL 2536

Master Permit #: BLR2019-2834

Sub Permit #: _____

Revision #: _____

OFFICE USE ONLY

ZONING	☐ Approved	Date	Disapproved	☐	BUILDING	☐ Approved	Date	Disapproved	☐	STRUCT.	☐ Approved	Date	Disapproved
	Date					Date					Date		
	Initials					Initials					Initials		
ROOFING	☐ Approved	Date	Disapproved	☐	ELECT.	☐ Approved	Date	Disapproved	☐	MECH.	☐ Approved	Date	Disapproved
	Date					Date					Date		
	Initials					Initials					Initials		
PLUMBING	☐ Approved	Date	Disapproved	☐	FLOOD	☐ Approved	Date	Disapproved	☐		☐ Approved	Date	Disapproved
	Date					Date					Date		
	Initials					Initials					Initials		

PLANS CHECKED-OUT

DATE	NAME

PLANS CHECKED-IN

DATE	NAME

	AMOUNTS
BASE PERMIT	
ZONING FEE	
CODE COMPLIANCE FEE	
TECHNOLOGY FEE	
DBPR SURCH. STATE	
DBPR SURCH. BUILDING	
SCANNING FEE	
WORK W/O PERMIT FEE	
UPFRONT FEE PAID	250.00
BALANCE DUE:	

Miami Dade County Department of Regulatory And Economic Resources - Job Copy

3219016761 - 8/9/2019 3:30:49 PM

TOML Permit Application.pdf

Issuing Clerk: _____ Date: ____/____/____



6601 Main St • Miami Lakes, Florida, 33014
Office: (305) 827-4015 • Fax: (305) 558-9884
Website: www.miamilakes-fl.gov

BUILDING PERMIT APPLICATION

Job Address: 16036 NW 89 CT

Unit #:

Folio #: 32- 2016-005 0780 Owner-Builder: ☒

Master Permit #: BL2019-2834 Sub Permit #: _____ Revision #: _____

OWNER INFORMATION	LEGAL USE/WORK
NAME: Lennar Homes	Current Use of Property: <u>Vacant</u>
Address: 730 NW 107th Avenue 3rd Floor	Job Description: <u>SFR MODEL 2536</u> <u>MASTER BLR20190623</u>
City, State, Zip Miami, FL 33172	<u>LOT 04 BLK 03</u>
Phone #: 786-348-3251 Cell #: 786-326-8380	JOB COST \$ <u>\$245,456.00</u> AREA/LENGTH: <u>3021</u> SF/LF
Email Address: lydiacabrera@catpermitprocessing.com	Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐
Company Name: Lennar Homes	Code in Effect: _____
Qualifier Name: Phil Serrate	Occupancy: _____
License # CGC062343	Construction Type: _____
Address 730 NW 107th Avenue 3rd Floor	Flood Zone/B.F.E.: _____ F.F.E.: _____
City, State, Zip Miami, FL 33172	Firm Name: <u>ESA Architects</u>
Phone #: 305-970-1692 Cell #: 786-348-3251	A/E of record: <u>Ed Silva</u>
Email Address: lydiacabrera@catpermitprocessing.com	License # <u>0011131</u>
	Address <u>8900 SW 117 Ave, #B107</u>
	City, State, Zip <u>Miami, FL 33186</u>
	Phone #: <u>305-275-8383</u> Cell #: <u>786-348-3251</u>
	Email Address: <u>anaros@bellsouth.net</u>

CONTRACTOR INFORMATION	ARCHITECT/ENGINEER
Permit Type -- Check only One	Change to Permit -- Check only One
☒ Building ☐ Electrical ☐ Mechanical ☐ Plumbing/Gas	☐ Extension ☐ Renewal ☐ Revision
☐ Paving/Drainage ☐ Sign ☐ Roofing ☐ PW	☐ Change Contractor ☐ Shop Drawing ☐ Cancellation

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards, of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, RE-ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I Certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature of Owner or Owner's Agent

Date 3/7/19

Phil Serrate

Print Name of Owner or Owner's Agent

X

Signature of Qualifier

Date 3/7/19

Phil Serrate

Print Name of Qualifier

STATE OF Florida COUNTY OF Dade

STATE OF Florida COUNTY OF Dade

Sworn to and subscribed before me this 7th of March 20 19

Sworn to and subscribed before me this 7th of March 20 19

Miami Dade County Department of Regulatory And Economic Resources - Job Copy

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TCAOL Permit Application.pdf

NOTICE: In addition to the requirements

that may be applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

NOTE: This application will be void if there are no reviews after six(6) months.

MARIA LEVY
MY COMMISSION # FF988551
EXPIRES: September 3, 2020
Bonded Thru Notary Public Underwriters

Personally known ☒ or I.D.

MARIA LEVY
MY COMMISSION # FF988551
EXPIRES: September 3, 2020
Bonded Thru Notary Public Underwriters

and restrictions enforced by the homeowner's associations