



## **Historic Architectural Review Commission Staff Report for Item 13**

To: Chairman Haven Burkee and Historic Architectural Review  
Commission Members

From: Daniela Salume, MFA  
Historic Architectural Preservationist

Meeting Date: May 27, 2025

Applicant: Sandbar Design Studio, Inc

Application Number: C2025-0040

Address: 309 William Street

### **Description of Work:**

Demolition of existing ~~non~~-historic rear shed structures and partial demolition of historic structure to accommodate new addition.

### **Site Facts:**

The building under review is a historic and contributing structure within the historic district, constructed circa 1885. This one-story house is located at the corner of William Street and Sawyers Lane. The site includes the primary wood-frame structure along with one-story rear additions.

Currently the house sits on piers and is located within an AE-7 flood zone.



*Photo of property under review circa 1965. Monroe County Library.*



*Photo of property under review June 2008. Monroe County Library.*





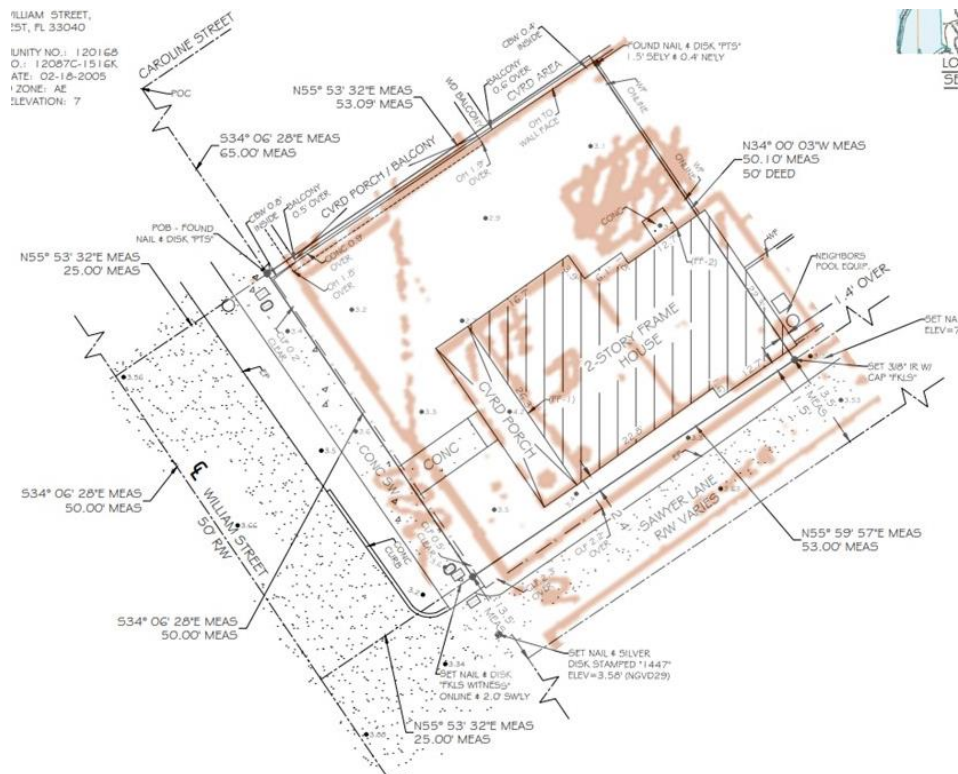
*Photo of property under review.*



*Photo of property under review.*



*Photo of property under review.*



*1962 Sanborn Map and current survey.*

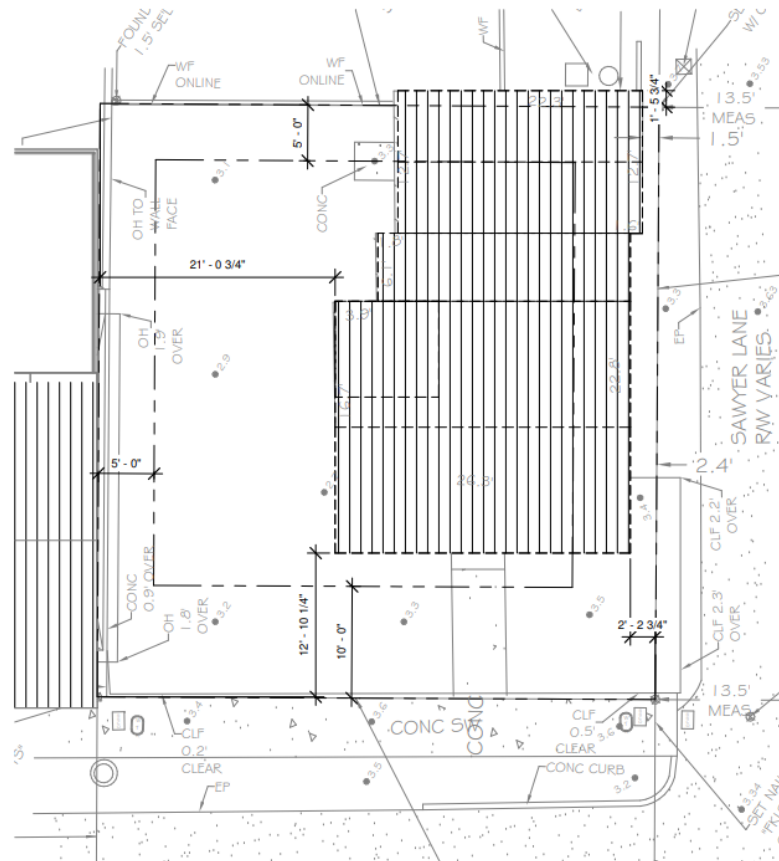


### **Ordinance Cited on Review:**

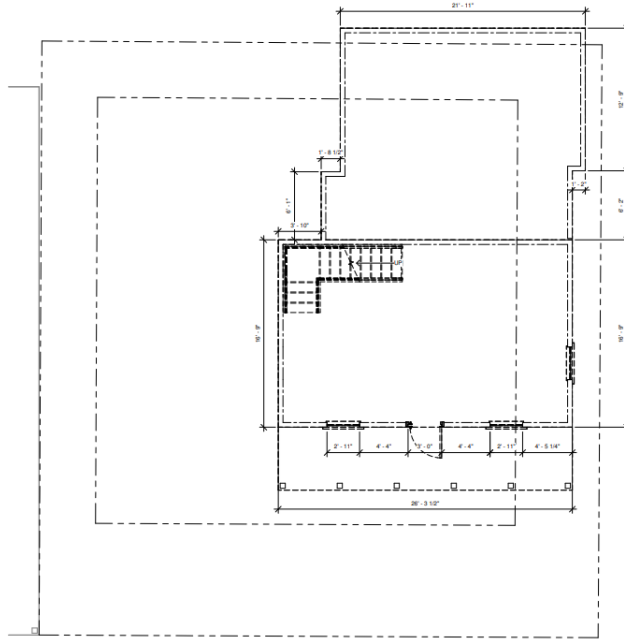
- Section 102-217 (4), demolition for contributing and historic structures of the Land Development Regulations.
- Section 102-218 - Criteria for Demolition of the Land Development Regulations.

### **Staff Analysis:**

The Certificate of Appropriateness proposes the demolition of the existing historic rear shed additions, as well as partial demolition of the historic structure, to accommodate the construction of a new two-story addition.



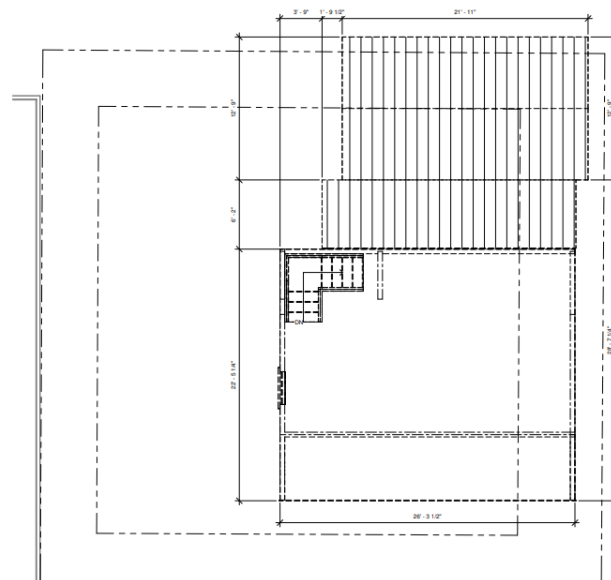
*Existing Site Plan/Demo.*



1  
A.2  
EXISTING/DEMO 1ST FLOOR  
1/4" = 1'-0"



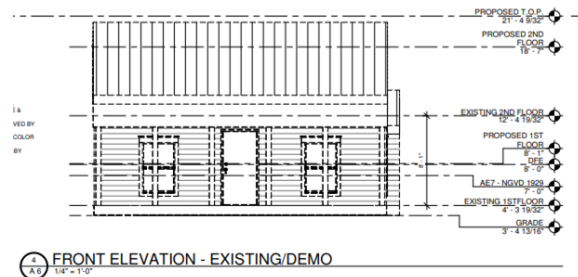
*Existing Floor Plan/Demo.*



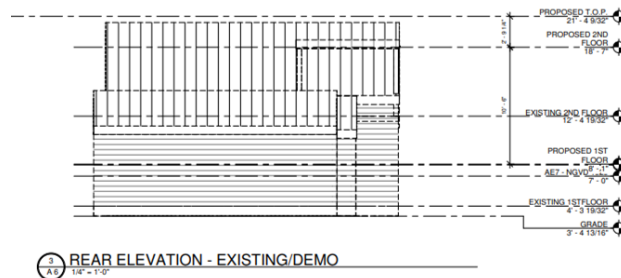
1  
A.3  
EXISTING/DEMO 2ND FLOOR  
1/4" = 1'-0"

*Existing Second Floor Plan.*

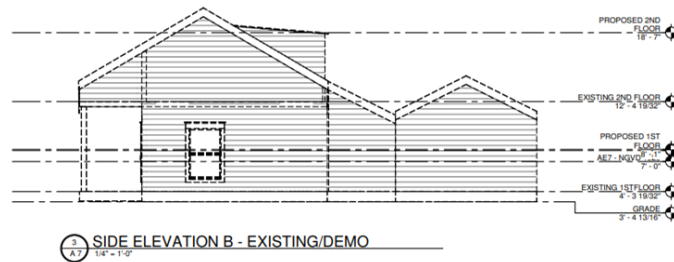




*Existing Front Elevation. Dashed outline proposed to be demolished.*



*Existing Rear Elevation. Dashed outline proposed to be demolished.*



*Existing Side Elevation. Dashed outline proposed to be demolished.*

It is staff's opinion that the request for this demolition shall be based on the demolition criteria of Chapter 102 Section 218 (a) of the LDR's. The criteria for demolition of historic structures state the following:

(a) *The historic architectural review commission shall issue a certificate of appropriateness for an application for demolition:*

- (1) *If the subject of the application is a contributing or historic building or structure, then it should not be demolished unless its condition is irrevocably compromised by extreme deterioration, or it does not meet any of the criteria of section 102-125(1) through (9).*

The elements proposed for demolition are considered historic and contributing; however, they show significant deterioration, including

wood rot, water damage, and unstable piers. The severity of the deterioration suggests that the condition of the rear structures may be irrevocably compromised.

The following is the criteria of section 102-125:

- 1 *Embodies no distinctive characteristics of a type, period, or method of construction of aesthetic or historic significance in the city and is not a significant and distinguishable building entity whose components may lack individual distinction.*

Staff opines that while the main structure is modest in design, it does reflect elements of early 20th-century Key West vernacular architecture. However, the building lacks distinctive stylistic or construction features that would make it architecturally significant beyond its contributing status.

- 2 *Is not specifically associated with events that have made a significant contribution to local, state, or national history.*

It is staff understanding that no significant events have ever happened on the site relevant to local, state, or national history.

- 3 *Has no significant character, interest, or value as part of the development, heritage, or cultural characteristics of the city, state, or nation, and is not associated with the life of a person significant in the past.*

It is staff's understanding that the elements under review have no significant character and are not associated with the life of a significant person in the past.

- 4 *Is not the site of a historic event with a significant effect upon society.*

It is staff's understanding that the site is not associated with any significant event.

- 5 *Does not exemplify the cultural, political, economic, social, or historic heritage of the city.*

It is staff's understanding that the elements under review do not exemplify the cultural, political, economic, social or historic heritage of the city, though the structure does contribute to the overall historic fabric of the district.

- 6 *Does not portray the environment in an era of history characterized by a distinctive architectural style.*



Staff believes that the existing building does not portray an era of history characterized by a distinctive architectural style.

- 7 *If a part of or related to a square, park, or other distinctive area, nevertheless should not be developed, or preserved according to a plan based on the area's historic, cultural, natural, or architectural motif.*

This is not the case.

- 8 *Does not have a unique location or singular physical characteristic which represents an established and familiar visual feature of its neighborhood or of the city, and does not exemplify the best remaining architectural type in a neighborhood; and*

The elements under review do not have a unique location or physical characteristics which represent an established and familiar visual feature of its neighborhood or of the city. However, the building dates back to 1885.

- 9 *Has not yielded, and is not likely to yield, information important in history.*

Staff believes that based on current documentation, the structure has not yielded, and is unlikely to yield, any historically significant information.

It is staff's opinion that the request for demolition may be considered, as the structures under review meet the criteria for demolition. Although the main house and rear sheds contribute to the historic district, their architectural and historical significance is limited. The rear shed structures, though confirmed as historic based on their presence in the 1892 Sanborn Map (first addition), 1899 Sanborn Map (second addition), and 1926 Sanborn Map (current layout), are in poor condition and lack distinctive features. If approved, the demolition will require two readings, as required for contributing structures within the historic district. Staff will review submitted construction plans for demolition and design to ensure consistency with submitted drawings.

# APPLICATION



# HARC MAJOR PROJECTS CERTIFICATE OF APPROPRIATENESS



## City of Key West

1300 White Street  
Key West, Florida 33040

HARC COA #	REVISION #	INITIAL & DATE
FLOOD ZONE	ZONING DISTRICT	BLDG PERMIT #
AE7	HMDR	

**A PRE-APPLICATION MEETING WITH HARC STAFF IS REQUIRED PRIOR TO SUBMITTAL**

ADDRESS OF PROPOSED PROJECT:

309 William Street

NAME ON DEED:

Craig A Schmitz Trust

PHONE NUMBER  
314-565-4148

OWNER'S MAILING ADDRESS:

23 Windcastle Drive

EMAIL  
craig@craigschmitz.com

St. Charles, MO 63304

APPLICANT NAME:

Sandbar Design Studio, Inc

PHONE NUMBER  
847-903-5854

APPLICANT'S ADDRESS:

29183 Camellia Lane

EMAIL  
INFO@SANDBARDESIGNSTUDIO.COM

Big Pine Key, FL 33043

APPLICANT'S SIGNATURE:

*Erica Poole*

DATE  
4/18/2025

**ANY PERSON THAT MAKES CHANGES TO AN APPROVED CERTIFICATE OF APPROPRIATENESS MUST SUBMIT A NEW APPLICATION.**

FLORIDA STATUTE 837.06: WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING AND WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND-DEGREE PUNISHABLE PER SECTION 775.082 OR 775.083. THE APPLICANT FURTHER HEREBY ACKNOWLEDGES THAT THE SCOPE OF WORK AS DESCRIBED IN THE APPLICATION SHALL BE THE SCOPE OF WORK THAT IS CONTEMPLATED BY THE APPLICANT AND THE CITY. THE APPLICANT FURTHER STIPULATES THAT SHOULD FURTHER ACTION BE TAKEN BY THE CITY FOR EXCEEDING THE SCOPE OF THE DESCRIPTION OF WORK, AS DESCRIBED HEREIN, AND IF THERE IS CONFLICTING INFORMATION BETWEEN THE DESCRIPTION OF WORK AND THE SUBMITTED PLANS, THE AFOREMENTIONED DESCRIPTION OF WORK SHALL BE CONTROLLING.

PROJECT INCLUDES: REPLACEMENT OF WINDOWS X RELOCATION OF A STRUCTURE      ELEVATION OF A STRUCTURE X

PROJECT INVOLVES A CONTRIBUTING STRUCTURE: YES X NO      INVOLVES A HISTORIC STRUCTURE: YES X NO     

PROJECT INVOLVES A STRUCTURE THAT IS INDIVIDUALLY LISTED ON THE NATIONAL REGISTER: YES      NO     

**DETAILED PROJECT DESCRIPTION INCLUDING MATERIALS, HEIGHT, DIMENSIONS, SQUARE FOOTAGE, LOCATION, ETC.**

**GENERAL:**

RAISING OF EXISTING RESIDENCE TO 1" ABOVE DESIGN FLOOD ELEVATION. NEW ADDITION ON SIDE OF HOUSE. FUTURE POOL PER PLAN, WITH LOUVER WALL FOR SCREENING FROM SAWYER LANE.

**MAIN BUILDING:**

**DEMOLITION (PLEASE FILL OUT AND ATTACH DEMOLITION APPENDIX):**

DEMO OF EXISTING REAR SHED STRUCTURES (NON-HISTORIC). SEE DEMO APPENDIX

APPLICATIONS MUST BE SUBMITTED IN PERSON WITH HARD COPIES BY 3PM ON THE SCHEDULED DEADLINE  
PLEASE SEND AN ELECTRONIC COPY OF ALL DOCUMENTS [CITY\\_HARC@CITYOFKEYWEST-FL.GOV](mailto:CITY_HARC@CITYOFKEYWEST-FL.GOV)

ACCESSORY STRUCTURE(S):	
FUTURE POOL PER PLAN	
PAVERS:	FENCES:
	4' PICKET FENCE & 10' WIDE GATE PER PLAN
DECKS:	PAINTING:
WOOD FRAME DECKS PER PLAN, FRONT & REAR	PAINT COLOR TBD, WITH HARC APPROVAL, DURING CONSTRUCTION
SITE (INCLUDING GRADING, FILL, TREES, ETC):	POOLS (INCLUDING EQUIPMENT):
	FUTURE POOL PER PLAN, CONCEALED FROM SAWYER LANE W/ LOUVER WALL
ACCESSORY EQUIPMENT (GAS, A/C, VENTS, ETC):	OTHER:

OFFICIAL USE ONLY:	HARC COMMISSION REVIEW	EXPIRES ON:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
REASONS OR CONDITIONS:		
STAFF REVIEW COMMENTS:		
FIRST READING FOR DEMO:	SECOND READING FOR DEMO:	
HARC STAFF SIGNATURE AND DATE:	HARC CHAIRPERSON SIGNATURE AND DATE:	

THIS APPLICATION MAY BE REVIEWED BY PLANNING DEPARTMENT STAFF.



# HARC CERTIFICATE OF APPROPRIATENESS: DEMOLITION APPENDIX



**City of Key West**

1300 White Street  
Key West, Florida 33040

HARC COA #	INITIAL & DATE
ZONING DISTRICT	BLDG PERMIT #

ADDRESS OF PROPOSED PROJECT:	309 William Street
PROPERTY OWNER'S NAME:	FC Real Estate Investments LLC
APPLICANT NAME:	Sandbar Design Studio, Inc

*I hereby certify I am the owner of record and that the work shall conform to all applicable laws of this jurisdiction. By receiving a Certificate of Appropriateness, I realize that this project will require a Building Permit approval **PRIOR** to proceeding with the work outlined above and that a final inspection is required under this application. I also understand that any changes to an approved Certificate of Appropriateness must be submitted for review.*

PROPERTY OWNER'S SIGNATURE

**CRAIG SCHMITZ** 04-18-2025

DATE AND PRINT NAME

## DETAILED PROJECT DESCRIPTION OF DEMOLITION

RAISING OF EXISTING SFR. NEW FOUNDATION TO REPLACE DETERIORATED FOUNDATION.  
DEMO OF EXISTING NON-HISTORIC REAR SHED STRUCTURES.

## CRITERIA FOR DEMOLITION OF CONTRIBUTING OR HISTORIC STRUCTURES:

**Before any Certificate of Appropriateness may be issued for a demolition request, the Historic Architectural Review Commission must find that the following requirements are met (please review and comment on each criterion that applies):**

(1) If the subject of the application is a contributing or historic building or structure, then it should not be demolished unless its condition is irrevocably compromised by extreme deterioration or it does not meet any of the following criteria:

(a) The existing condition of the building or structure is irrevocably compromised by extreme deterioration.

THE EXISTING FOUNDATION IS EITHER NON-EXISTENT OR DETERIORATED. THE REAR SHED STRUCTURES ARE DETERIORATED AND NON-HISTORIC. THE HOUSE WILL BE RAISED 1" ABOVE DESIGN FLOOD ELEVATION.

(2) Or explain how the building or structure meets the criteria below:

(a) Embodies no distinctive characteristics of a type, period, or method of construction of aesthetic or historic significance in the city and is not a significant and distinguishable building entity whose components may lack individual distinction.

Nothing in this application is intended to alter the authority of the Building Official to condemn for demolition dangerous buildings, as provided in Section 102-218 of the Land Development Regulations and Chapter 14 of the Code of Ordinances.

(b) Is not specifically associated with events that have made a significant contribution to local, state, or national history.

(c) Has no significant character, interest, or value as part of the development, heritage, or cultural characteristics of the city, state or nation, and is not associated with the life of a person significant in the past.

(d) Is not the site of a historic event with significant effect upon society.

(e) Does not exemplify the cultural, political, economic, social, or historic heritage of the city.

(f) Does not portray the environment in an era of history characterized by a distinctive architectural style.

(g) If a part of or related to a square, park, or other distinctive area, nevertheless should not be developed or preserved according to a plan based on the area's historic, cultural, natural, or architectural motif.

(h) Does not have a unique location or singular physical characteristic which represents an established and familiar visual feature of its neighborhood or of the city, and does not exemplify the best remaining architectural type in a neighborhood.

Nothing in this application is intended to alter the authority of the Building Official to condemn for demolition dangerous buildings, as provided in Section 102-218 of the Land Development Regulations and Chapter 14 of the Code of Ordinances.

(i) Has not yielded, and is not likely to yield, information important in history,

CRITERIA FOR DEMOLITION OF NON-CONTRIBUTING OR NON-HISTORIC STRUCTURES:
The following criteria will also be reviewed by the Historic Architectural Review Commission for proposed demolitions. The Commission shall not issue a Certificate of Appropriateness that would result in the following conditions (please review and comment on each criterion that applies):
(1) Removing buildings or structure that are important in defining the overall historic character of a district or neighborhood so that the character is diminished.
THE REAR SHED STRUCTURES ARE NON-HISTORIC AND DO NOT DEFINE THE OVERALL HISTORIC CHARACTER OF THE DISTRICT/NEIGHBORHOOD
(2) Removing historic buildings or structures and thus destroying the historic relationship between buildings or structures and open space.
THE REMOVAL OF THESE STRUCTURES DOES NOT DESTROY THE HISTORIC RELATIONSHIP BETWEEN BUILDINGS AND OPEN SPACE. PER THE SANBORN MAP, THE REAR OF THE LOT DID NOT HAVE A RESIDENCE ON IT. THE SIDE YARD HAD STRUCTURES ALONG THE RED DOORS.
(3) Removing an historic building or structure in a complex; or removing a building façade; or removing a significant later addition that is important in defining the historic character of a site or the surrounding district or neighborhood.
THE REAR SHED ADDITIONS ARE NOT HISTORIC TO THE SITE.
(4) Removing buildings or structures that would otherwise qualify as contributing.
THE REAR STRUCTURES ARE NOT CONTRIBUTING.

U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

OMB Control No. 1660-0008  
Expiration Date: 06/30/2026

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: <u>CRAIG SCHMITZ</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>309 WILLIAM STREET</u>	Company NAIC Number: _____
City: <u>KEY WEST</u> State: <u>FL</u> ZIP Code: <u>33040</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>MONROE COUNTY PROPERTY APPRAISER PARCEL ID 00003170-000000</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>RESIDENTAL</u>	
A5. Latitude/Longitude: Lat. <u>24°33'36.30"</u> Long. <u>-081°48'02.00"</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input checked="" type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>5</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): <u>N/A</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u>	
d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: <u>N/A</u> sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u>	
d) Total net open area of non-engineered flood openings in A9.c: <u>N/A</u> sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>N/A</u> sq. ft.	
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>CITY OF KEY WEST</u> B1.b. NFIP Community Identification Number: <u>120168</u>	
B2. County Name: <u>MONROE</u> B3. State: <u>FL</u> B4. Map/Panel No.: <u>12087C1516</u> B5. Suffix: <u>K</u>	
B6. FIRM Index Date: <u>02/18/2005</u> B7. FIRM Panel Effective/Revised Date: <u>02/18/2005</u>	
B8. Flood Zone(s): <u>AE</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>7</u>	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

# ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

309 WILLIAM STREET

City: KEY WEST

State: FL

ZIP Code: 33040

## FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: AA0002

Vertical Datum: NGVD29

Indicate elevation datum used for the elevations in items a) through h) below.

☒ NGVD 1929 ☐ NAVD 1988 ☐ Other: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used?

☒ Yes ☐ No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

a) Top of bottom floor (including basement, crawlspace, or enclosure floor):

3.6

☒ feet ☐ meters

b) Top of the next higher floor (see Instructions):

4.3

☒ feet ☐ meters

c) Bottom of the lowest horizontal structural member (see Instructions):

N/A

☐ feet ☐ meters

d) Attached garage (top of slab):

N/A

☐ feet ☐ meters

e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):

9.2

☒ feet ☐ meters

f) Lowest Adjacent Grade (LAG) next to building: ☒ Natural ☐ Finished

2.7

☒ feet ☐ meters

g) Highest Adjacent Grade (HAG) next to building: ☒ Natural ☐ Finished

3.4

☒ feet ☐ meters

h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:

2.7

☒ feet ☐ meters

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☐ Check here if attachments and describe in the Comments area.

Certifier's Name: ERIC ISAACS

License Number: PSM 6783

Title: SURVEYOR AND MAPPER

Company Name: FLORIDA KEYS LAND SURVEYING

Address: 21460 OVERSEAS HWY, SUITE 4

City: CUDJOE KEY

State: FL

ZIP Code: 33042

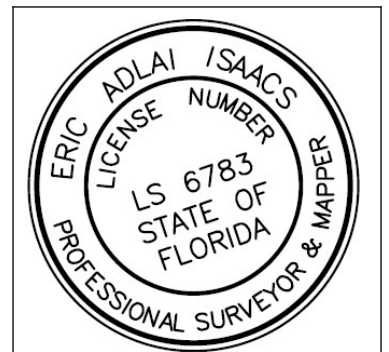
Telephone: (305) 394-3690

Ext.: \_\_\_\_\_

Email: FKLSEMAIL@GMAIL.COM

Signature: \_\_\_\_\_

Date: 02/07/2025



Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):  
THE BUILDING=A 1 STORY HOUSE W/ MULTIPLE FLOOR LEVELS, ON COLUMNS. C2e=THE ELEVATION OF THE BOTTOM OF THE ELECTRIC METER / PANEL DISCONNECT BOX. THE LATITUDE AND LONGITUDE WERE DETERMINED BY USING GOOGLE EARTH.



# ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

309 WILLIAM STREET

City: KEY WEST

State: FL

ZIP Code: 33040

## FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

## SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☐ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) of the building is: \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E3. Attached garage (top of slab) is: \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown The local official must certify this information in Section G.

## SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

☐ Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

# ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

309 WILLIAM STREET

City: KEY WEST

State: FL

ZIP Code: 33040

## FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

## SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. ☐ A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. ☐ A local official completed Section H for insurance purposes.
- G3. ☐ In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. ☐ The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: \_\_\_\_\_ G6. Date Permit Issued: \_\_\_\_\_
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G11. Variance issued? ☐ Yes ☐ No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: \_\_\_\_\_ Title: \_\_\_\_\_

NFIP Community Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

# ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

309 WILLIAM STREET

City: KEY WEST

State: FL

ZIP Code: 33040

## FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

## SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) **For Building Diagrams 1A, 1B, 3, and 5–8.** Top of bottom \_\_\_\_\_ ☐ feet ☐ meters ☐ above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) **For Building Diagrams 2A, 2B, 4, and 6–9.** Top of next \_\_\_\_\_ ☐ feet ☐ meters ☐ above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is **all** Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

☐ Yes ☐ No

## SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

☐ Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
309 WILLIAM STREET

City: KEY WEST State: FL ZIP Code: 33040

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: FRONT VIEW - 01/29/2025

Clear Photo One



Photo Two

Photo Two Caption: SIDE VIEW - 01/29/2025

Clear Photo Two

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**  
**BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
309 WILLIAM STREET

City: KEY WEST State: FL ZIP Code: 33040

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: REAR VIEW - 01/29/2025

Clear Photo Three



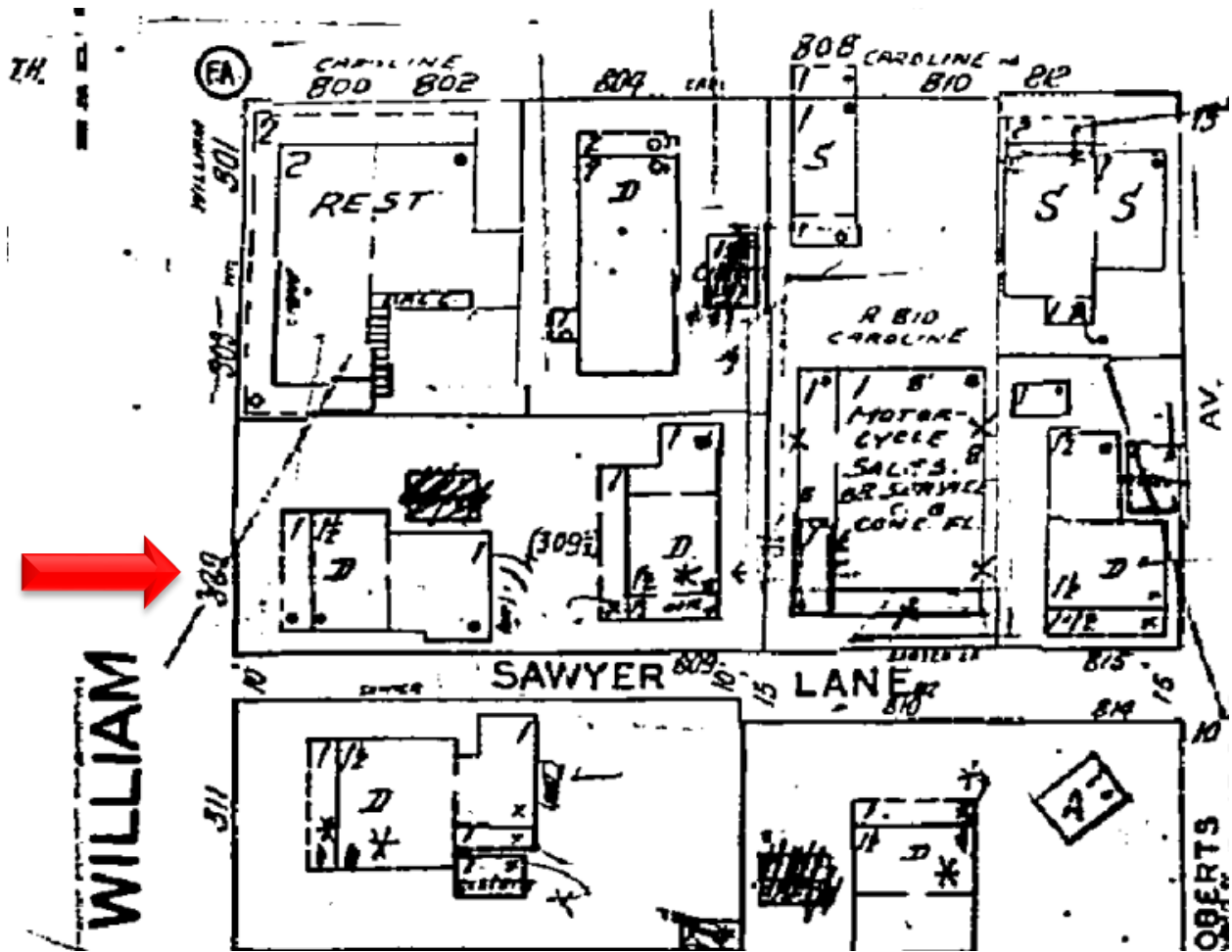
Photo Four

Photo Four Caption: SIDE VIEW - 01/29/2025

Clear Photo Four



# SANBORN MAPS

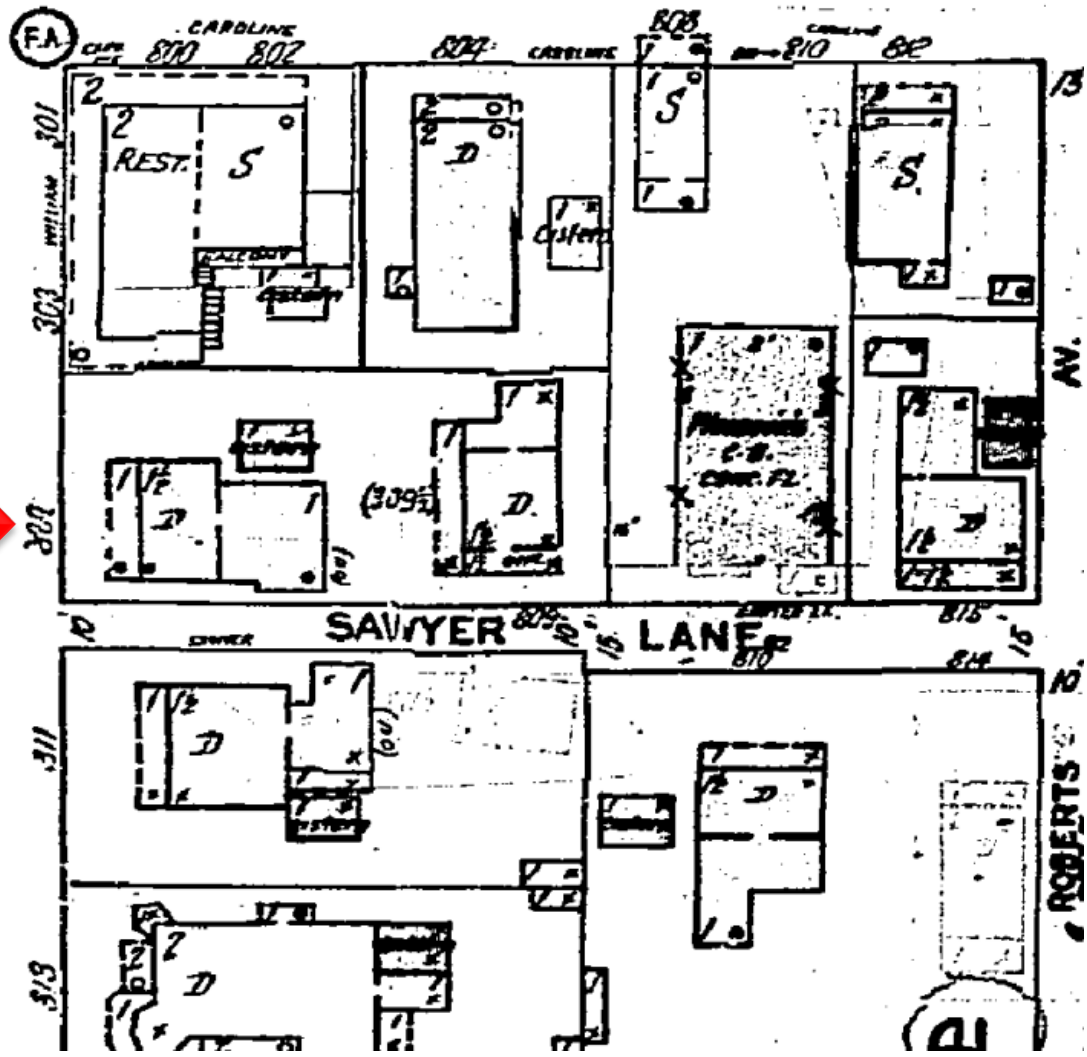


1962 Sanborn Map

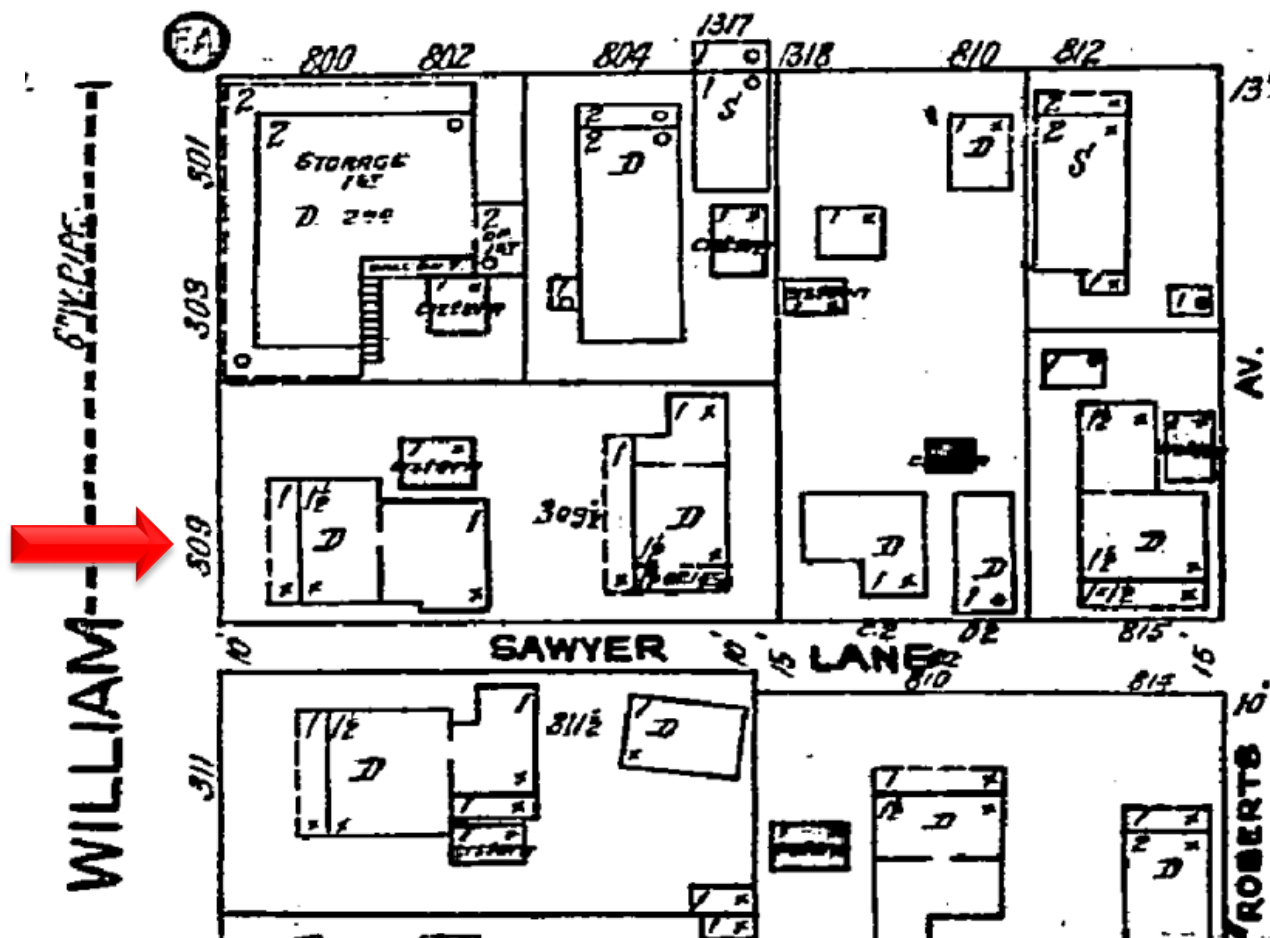
1/2



WILLIAM

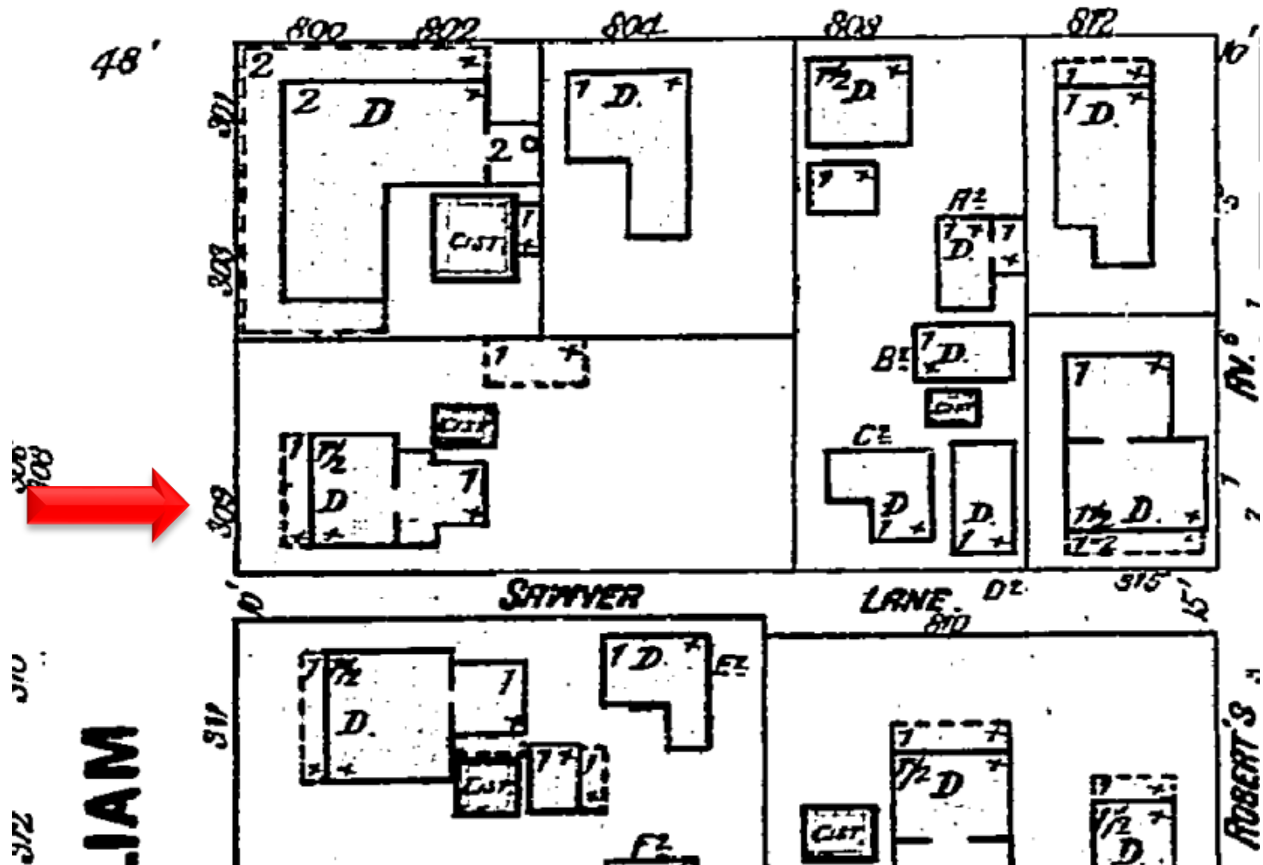


1948 Sanborn Map



1926 Sanborn Map

# CAROLINE



1899 Sanborn Map



[illegible]

1892 Sanborn Map

# PROJECT PHOTOS

## SANBORN MAP APRIL 1899



**PHOTOS OF RESIDENCE**



































































































# SURVEY

BEARING BASE:  
ALL BEARINGS ARE BASED  
ON S34°06'128"E ASSUMED  
ALONG THE CENTERLINE OF  
WILLIAM STREET .

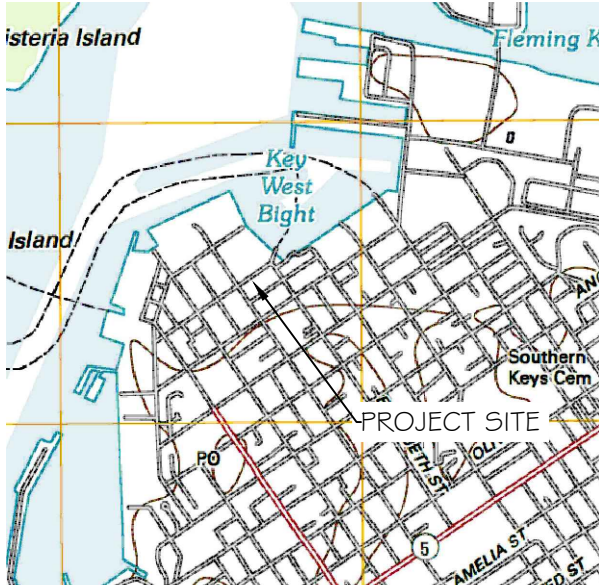
ALL ANGLES DEPICTED  
ARE 90 DEGREES UNLESS  
OTHERWISE INDICATED

ALL UNITS ARE SHOWN IN  
U.S. SURVEY FEET

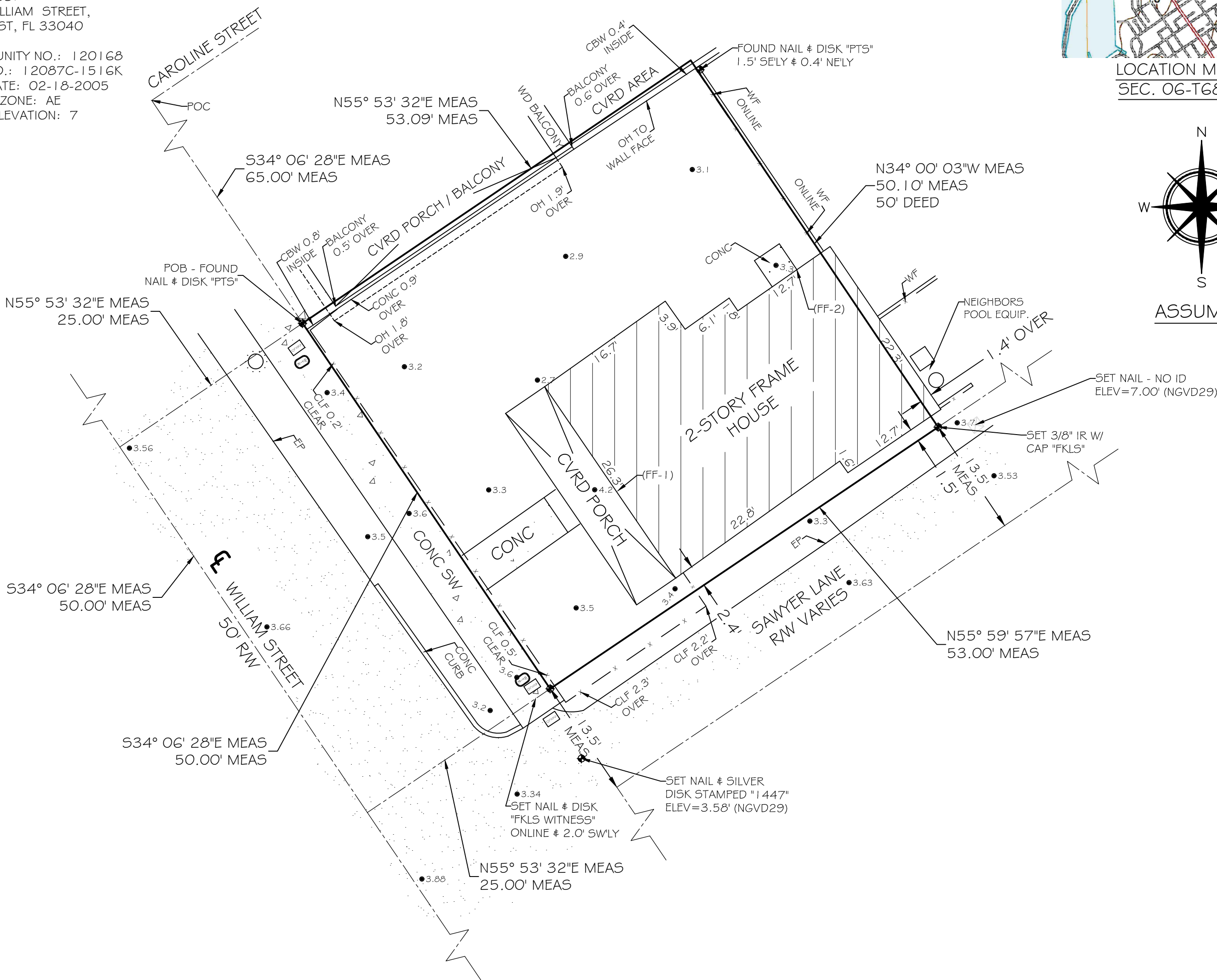
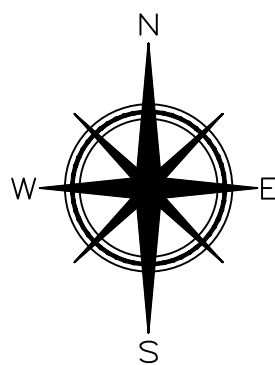
ADDRESS:  
309 WILLIAM STREET,  
KEY WEST, FL 33040

COMMUNITY NO.: 120168  
MAP NO.: 12087C-1516K  
MAP DATE: 02-18-2005  
FLOOD ZONE: AE  
BASE ELEVATION: 7

# MAP OF BOUNDARY SURVEY

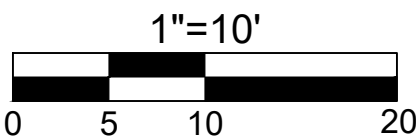


LOCATION MAP - NTS  
SEC. 06-T685-R25E



## LEGEND

- - WATER METER
- - SANITARY SEWER CLEAN OUT
- - MAILBOX
- - WOOD POWER POLE
- ⊗ - CONCRETE POWER POLE



TOTAL AREA = 2,654.97 SQFT ±

## SURVEYOR NOTES:

- ELEVATIONS SHOWN HEREON ARE IN FEET AND BASED ON THE NATIONAL GEODETIC VERTICAL DATUM OF 1929 (NGVD 1929), AND ARE CERTIFIED TO AN ACCURACY OF +/- 0.10'.
- BENCHMARK DESCRIPTION: NATIONAL GEODETIC SURVEY BENCHMARK "D 121" (P.I.D. AA0020), ELEVATION= 3.91' (NGVD 1929).
- THE FINISH FLOOR ELEVATION (FF) WAS TAKEN AT AN EXTERIOR DOOR THRESHOLD, NO INTERIOR FLOOR ELEVATIONS WERE VERIFIED. (FF-1)=4.3' (NGVD 1929) (FF-2)=3.6' (NGVD 1929)
- THIS SURVEY WAS PERFORMED FOR THE SOLE AND EXCLUSIVE BENEFIT OF THE PARTIES LISTED HEREIN AND SHALL NOT BE RELIED UPON BY ANY OTHER ENTITY OR INDIVIDUAL WHOMSOEVER. LIKEWISE, ANY REUSE OF THIS SURVEY FOR ANY PURPOSE OTHER THAN WHICH WAS ORIGINALLY INTENDED, WITHOUT THE WRITTEN PERMISSION OF THE UNDERSIGNED SURVEYOR & MAPPER WILL BE DONE SO AT THE RISK OF THE REUSING PARTY AND WITHOUT ANY LIABILITY TO THE UNDERSIGNED SURVEYOR & MAPPER.
- THIS SURVEY DOES NOT PURPORT TO SHOW OWNERSHIP OF WALLS OR FENCES ALONG PROPERTY LINES.

CERTIFIED TO -

CRAIG SCHMITZ;

NOTE: FOUNDATIONS BENEATH THE SURFACE ARE NOT SHOWN. MEASURED DIMENSIONS EQUAL PLATTED OR DESCRIBED DIMENSIONS UNLESS INDICATED OTHERWISE.  
THE FOLLOWING IS A LIST OF ABBREVIATIONS THAT MAY BE FOUND ON THIS SHEET.

BFP = BACK-FLOW PREVENTER	GYW = GUY WIRE	POC = POINT OF COMMENCEMENT
BO = BLOW-OUT	HB = HOSE BIB	PRC = POINT OF REVERSE CURVE
C 4 G = 2" CONCRETE CURB & GUTTER	IP = IRON PIPE	PRM = PERMANENT REFERENCE
CB = CONCRETE BLOCK	LS = LANDSCAPING	
CBW = CONCRETE BLOCK WALL	MB = MAILBOX	
CL = CENTERLINE	MEAS = MEASURED	
CLP = CHAINLINK FENCE	MF = METAL FENCE	
CM = CONCRETE MONUMENT	MHWL = MEAN HIGH WATER LINE	
CONC = CONCRETE	NGVD = NATIONAL GEODETIC	
CPP = CONCRETE POWER POLE	VERTICAL DATUM (1929)	
CVRD = COVERED	NTS = NOT TO SCALE	
DEASE = DRAINAGE EASEMENT	OH = ROOF OVERHANG	
EL = ELEVATION	OHW = OVERHEAD WIRES	
ENCL = ENCLOSURE	PC = POINT OF CURVE	
EP = EDGE OF PAVEMENT	PM = PARKING METER	
FF = FINISHED FLOOR ELEVATION	PCC = POINT OF COMPOUND CURVE	
FR = FIRE HYDRANT	PCF = PERMANENT CONTROL POINT	
FI = FENCE INSIDE	POB = POINT OF BEGINNING	
FND = FOUND	PI = POINT OF INTERSECTION	
FO = FENCE OUTSIDE		
FOL = FENCE ON LINE		

## LEGAL DESCRIPTION -

On the Island of Key West, Monroe County, Florida, and known on William A. Whitehead's map delineated in February 1829, as Part Lot Three (3), Square, Twenty-one (21), more particularly described by metes and bounds as follows:

Situate on the Northeasterly side of William Street beginning at a point on William Street Sixty-Five (65) feet from the point where the Southeasterly line of Caroline Street intersects said William Street; thence running Southeasterly along William Street Fifty (50) feet; thence Northeasterly at right angles with said William Street Fifty-Three (53) feet; thence Northwesterly and parallel with William Street Fifty (50) feet; thence Southwesterly and parallel with Caroline Street Fifty-Three (53) feet to the point of beginning on William Street.

NOTE: LEGAL DESCRIPTIONS HAVE BEEN FURNISHED BY THE CLIENT OR HIS/HER REPRESENTATIVE. PUBLIC RECORDS HAVE NOT BEEN RESEARCHED BY THE SURVEYOR TO DETERMINE THE ACCURACY OF THESE DESCRIPTIONS NOR HAVE ADJOINING PROPERTIES BEEN RESEARCHED TO DETERMINE OVERLAPS OR HIATUS. ADDITIONS OR DELETIONS TO SURVEY MAP OR REPORT BY OTHER THAN THE SIGNING PARTY IS PROHIBITED WITHOUT WRITTEN CONSENT OF THE SIGNING PARTY. THE BOLD LINE SHOWN HEREON REPRESENTS THE SURVEYORS OPINION OF THE DEED LINES. THE MEAN HIGH WATER LINE WAS NOT DETERMINED FOR THIS SURVEY, THE APPARENT MEAN HIGH WATER LINE IS SHOWN FOR REFERENCE ONLY.

SCALE: 1"=10'  
FIELD WORK DATE: 01/29/2025  
MAP DATE: 02/07/2025  
REVISION DATE: XXXXXXXX  
SHEET: 1 OF 1  
DRAWN BY: IDG  
JOB NO.: 25-013

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND MEETS THE STANDARDS OF PRACTICE AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES AND COMPLIES WITH CHAPTER 177, FLORIDA STATUTES.

NOT VALID WITHOUT THE SIGNATURE AND THE RAISED SEAL OF A FLORIDA SURVEYOR AND MAPPER

SIGNED: ERIC A. ISAACS, F.S.M. #6783, PROFESSIONAL SURVEYOR AND MAPPER, LB# 7847



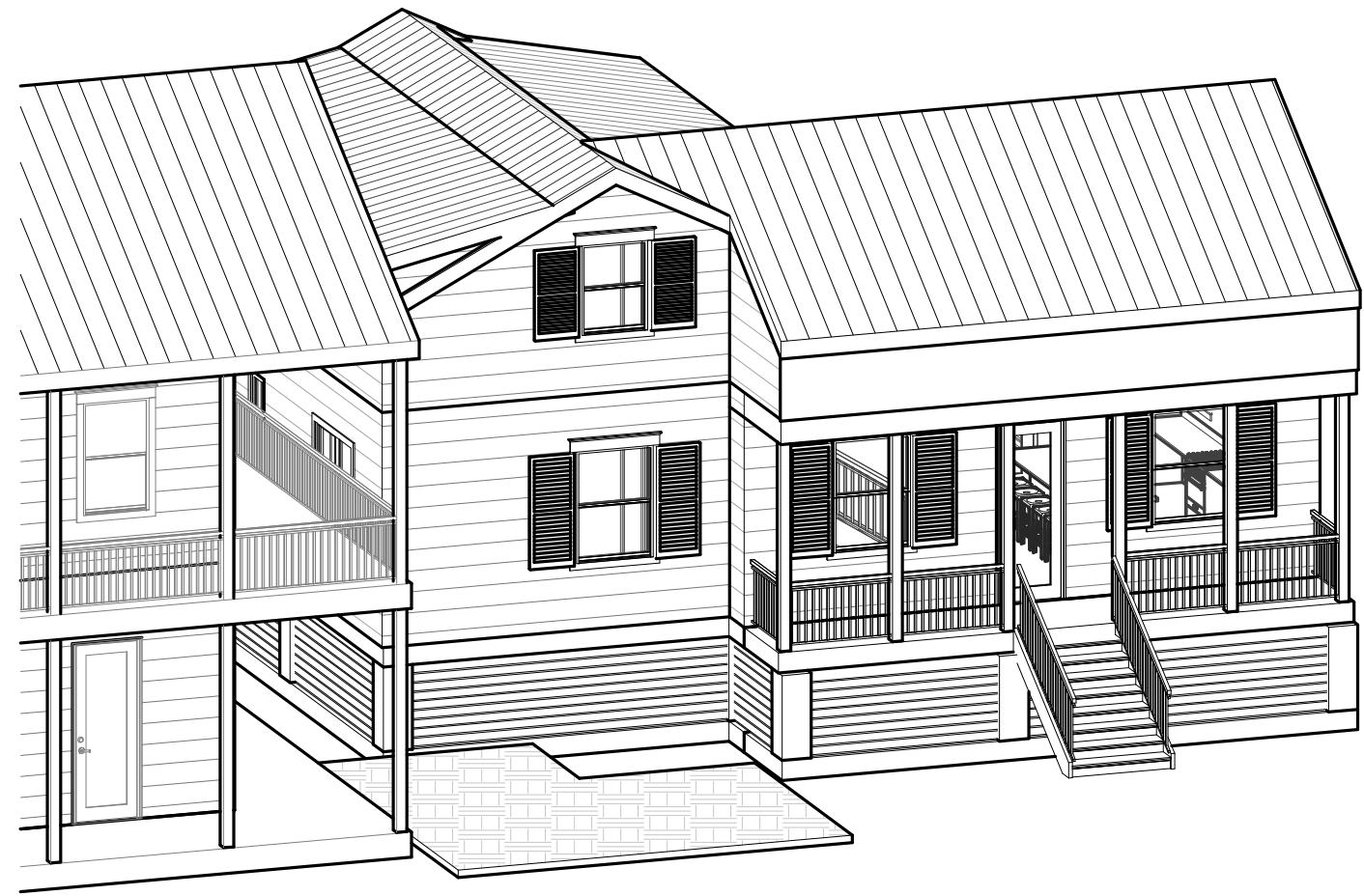
FLORIDA KEYS  
LAND SURVEYING  
21460 OVERSEAS HWY, SUITE 4  
CUDJOE KEY, FL 33042  
PHONE: (305) 394-3690  
FAX: (305) 509-7373  
EMAIL: FKL5email@Gmail.com

# PROPOSED DESIGN





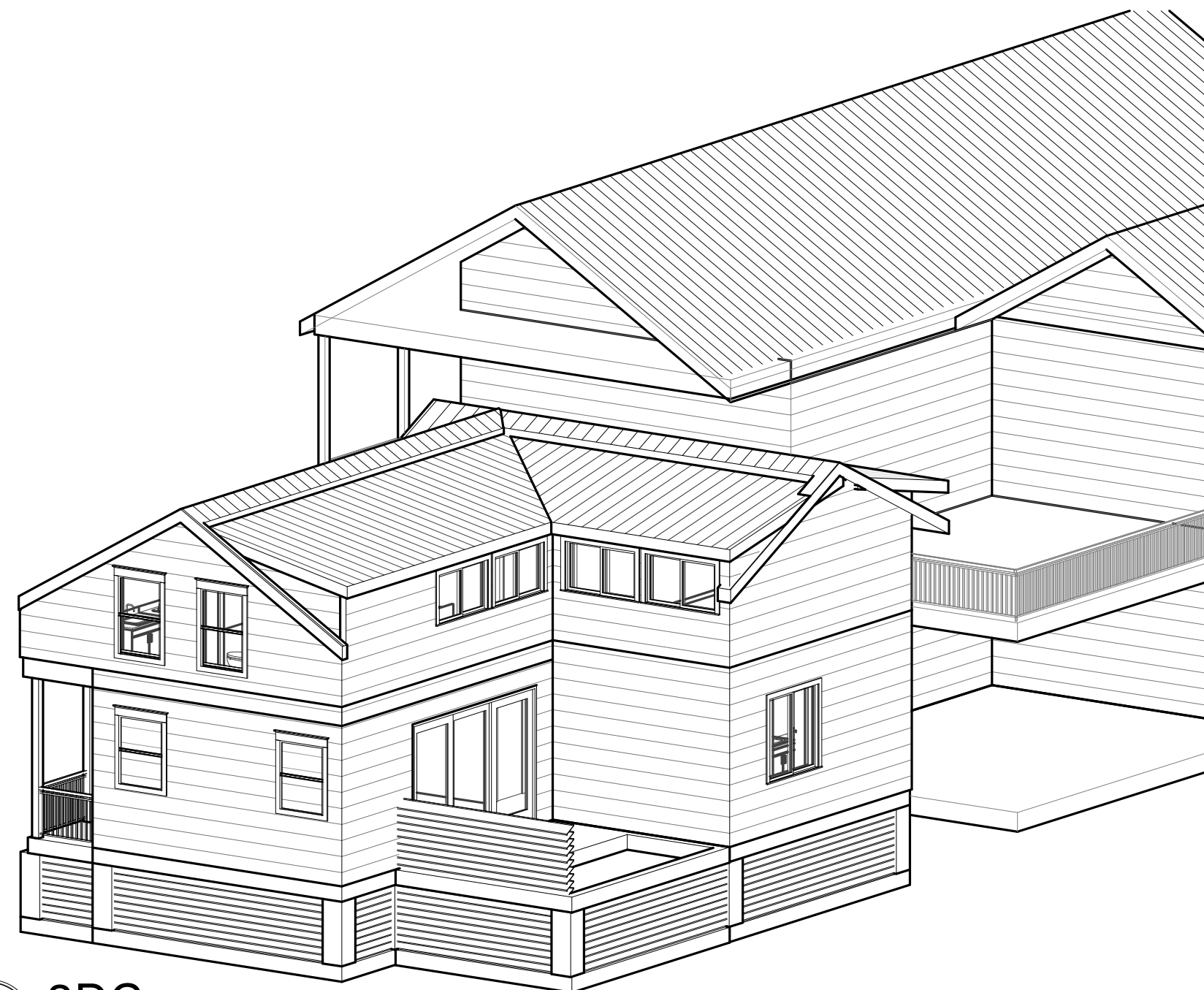




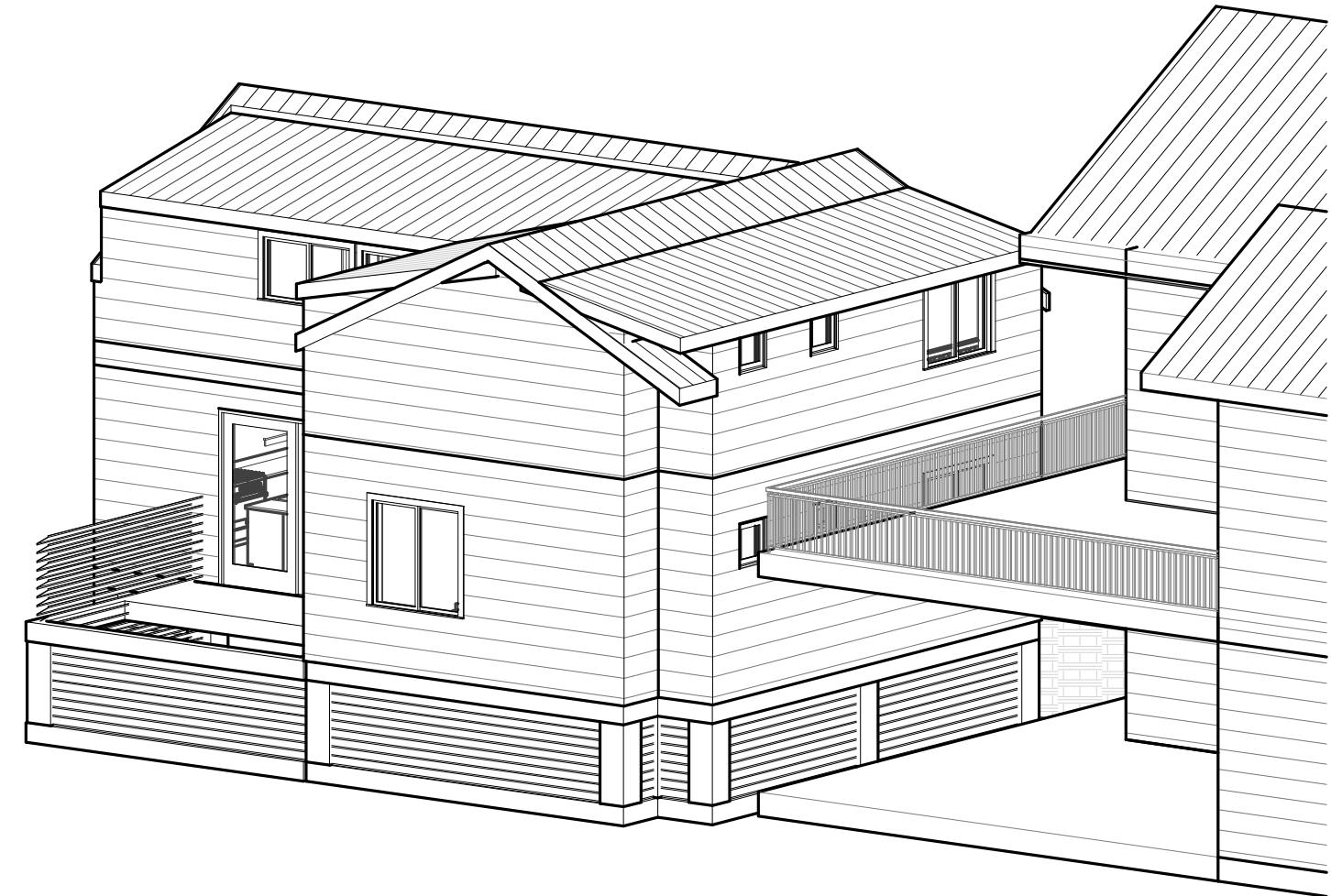
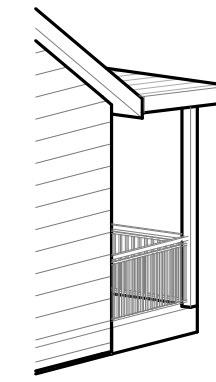
1  
A 1  
3DA

HARC NOTES:

- EXTERIOR SIDING TO BE HARDI BOARD.
- ROOFING TO BE STANDING SEAM METAL, MILL FINISH.
- EXTERIOR SOFFITS TO BE HARDI BOARD.
- EXTERIOR WINDOW/DOOR TRIM TO BE 1X4 HARDI.
- EXTERIOR FASCIA TO BE HARDI.
- ROOFING DRIP EDGE TO MATCH FINISH OF METAL ROOF.
- GUTTERS, IF PROVIDED, TO MATCH FINISH OF DRIP EDGE & ROOFING.
- EXTERIOR WINDOWS TO HAVE MUNTIN PATTERN APPROVED BY CITY OF KEY WEST HARC STAFF.
- CONTRACTOR TO RECEIVE APPROVAL FOR FINAL PAINT COLOR SELECTIONS.
- EXTERIOR SHUTTERS TO BE WOOD, PTD. AS APPROVED BY CITY OF KEY WEST HARC STAFF.



3  
A 1  
3DC



2  
A 1  
3DB

CAROLINE STREET

800 CAROLINE STREET



309 WILLIAM STREET



SAWYERS LANE

311 WILLIAM STREET



313 WILLIAM STREET



315 WILLIAM STREET



317 WILLIAM STREET



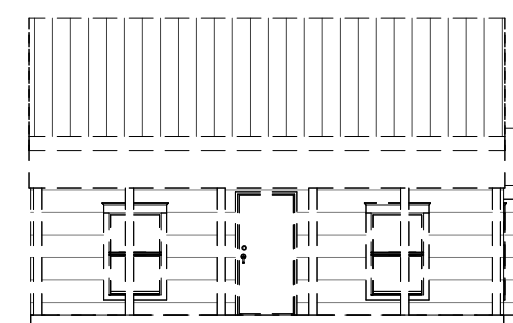
5  
A 1  
STREET ELEVATION - PROPOSED  
3/32" = 1'-0"

CAROLINE STREET

800 CAROLINE STREET



309 WILLIAM STREET



SAWYERS LANE

311 WILLIAM STREET



313 WILLIAM STREET



315 WILLIAM STREET



317 WILLIAM STREET



4  
A 1  
STREET ELEVATION - EXISTING/DEMO  
3/32" = 1'-0"

DATE: REV. SET DESCRIPTION  
2025.04.18 HARC SUBMITTAL SET

**Single Family Residence**  
309 William Street  
Key West, FL 33040

SEAL:

NOT FOR CONSTRUCTION

NOT VALID FOR CONSTRUCTION UNLESS  
SIGNED/SEALED IN THIS BLOCK  
THIS ITEM HAS BEEN DIGITALLY SIGNED AND  
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#AR98525

**SANDBAR**  
DESIGN STUDIO  
SANDBAR DESIGN STUDIO  
20185 CAMELIA LANE  
BIG PINE KEY, FL 33043  
WWW.SANDBARDESIGNSTUDIO.COM  
84719035854

STREET ELEVATIONS

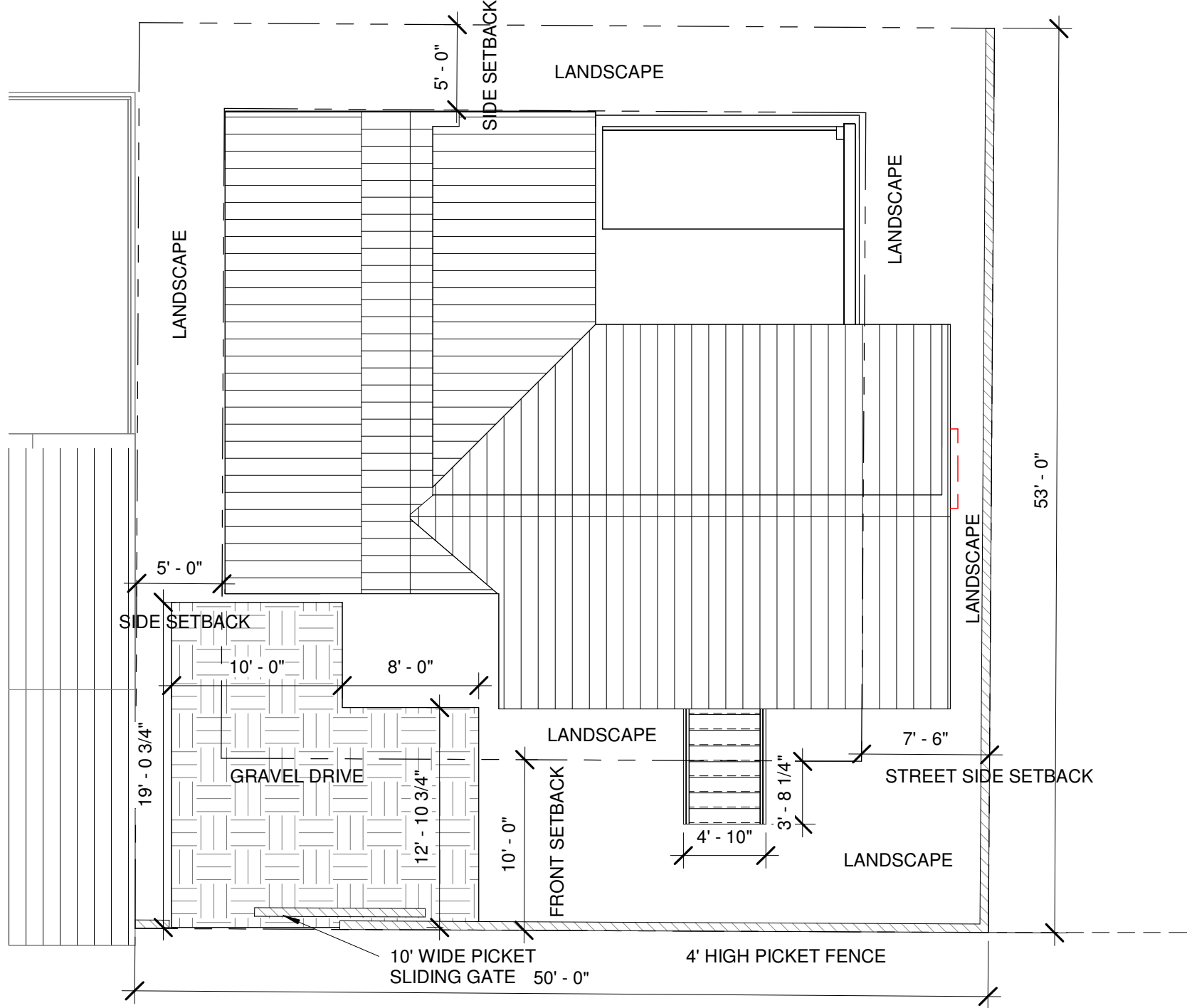
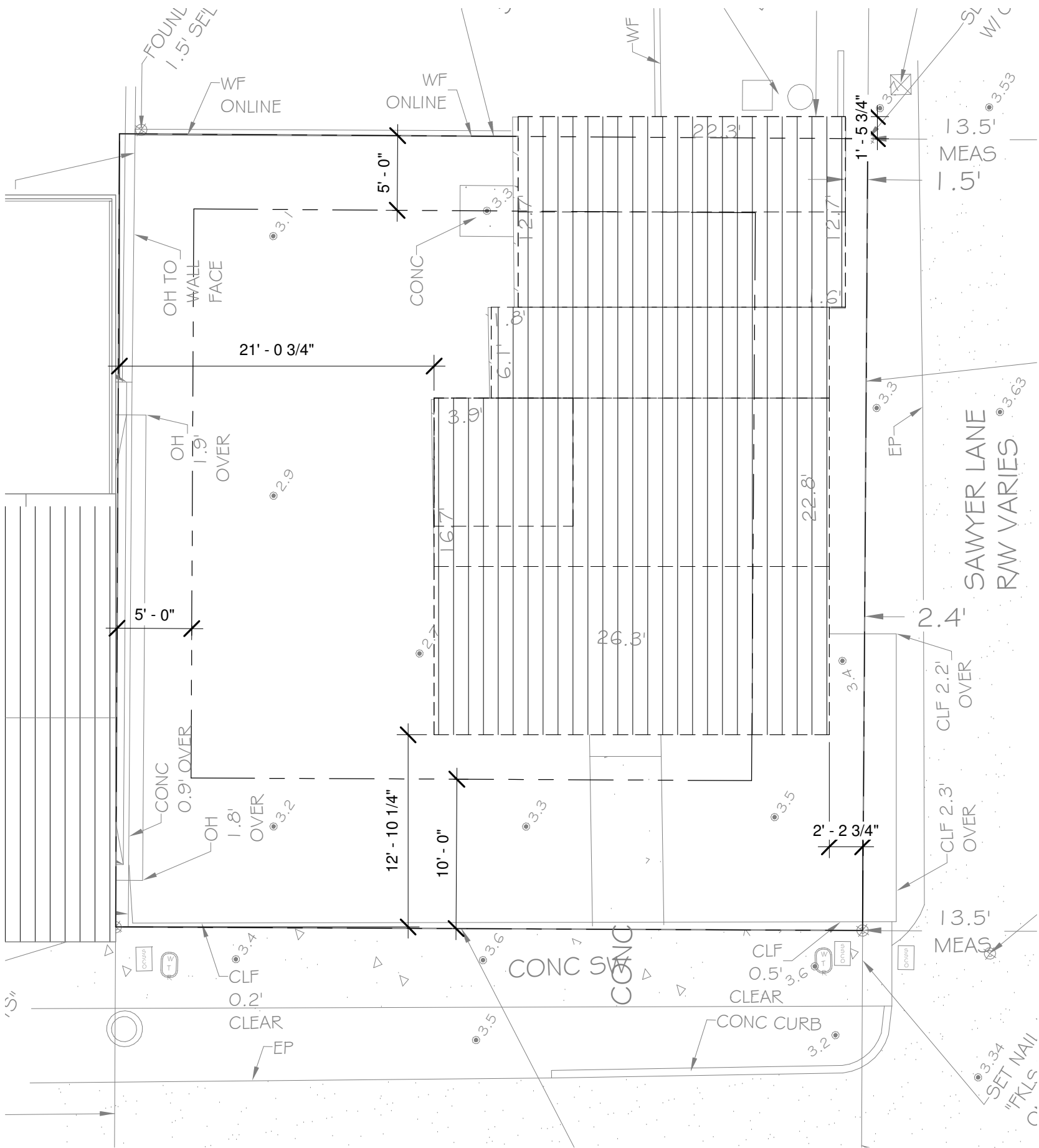
SHEET TITLE

A 1

PROJECT NO.  
SCH2025

DRAWN BY: Author  
APPROVED BY: Checker





SITE DATA TABLE				
	CODE REQUIREMENT	EXISTING SITE	PROPOSED	VARIANCE REQUEST
Zoning	HMDR	HMDR	HMDR	N/A
Flood Zone	X-ZONE/AE-6	X-ZONE/AE-6	X-ZONE/AE-6	N/A
Size of Site	2,655	2,650	2,650	N/A
Minimum Lot Size	4,000	2,650	2,650	N/A
Height	30'-0"	16'-3.25"	24'-10"	N/A
Front Setback	10'-0"	12'-10.25"	NO CHANGE	N/A
Side Setback A	5'-0"	6.8'	5'-0"	N/A
Street Side Setback	7'-6"	2'-2.75"	NO CHANGE	N/A
Rear Setback	15'-0"	NEG. 1.6'	15'-0"	N/A
Density	1 DU/ACRE	N/A	N/A	N/A
Building Coverage	40%	38%	40%	N/A
Impervious Surface	60%	40%	17%	N/A
Open Space	35%	60%	43%	N/A
Breakdowns (SF)				
Lot Area	2,655			
Existing Coverages			EXISTING	
Impervious Surface	1,069.06		Front Walkway	60.06
Impervious Surface (%)	40%		Existing House	1009.00
Building Coverage	1009.00			
Building Coverage (%)	38%			
Open Space	1,585.94			
Open Space (%)	60%			
Proposed Developments			PROPOSED	
Impervious Surface	449.50		House + Addition + Porch	1062.00
Impervious Surface (%)	17%			
Building Coverage	1,062.00		Pool	70.00
Building Coverage (%)	40%		Pool Deck	85.50
Open Space	1,143.50		Driveway	294.00
Open Space (%)	43%			

NOTE: FRONT STAIR LOCATION TO BE REVIEWED WITH PLANNING

1 SITE PLAN - EXISTING/DEMO  
1/8" = 1'-0"

2 SITE PLAN - PROPOSED  
1/8" = 1'-0"

Single Family Residence  
309 William Street  
Key West, FL 33040

SEAL:

NOT FOR CONSTRUCTION

NOT VALID FOR CONSTRUCTION UNLESS  
SIGNED/SEALED IN THIS BLOCK  
  
THIS ITEM HAS BEEN DIGITALLY SIGNED AND  
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#AR98525

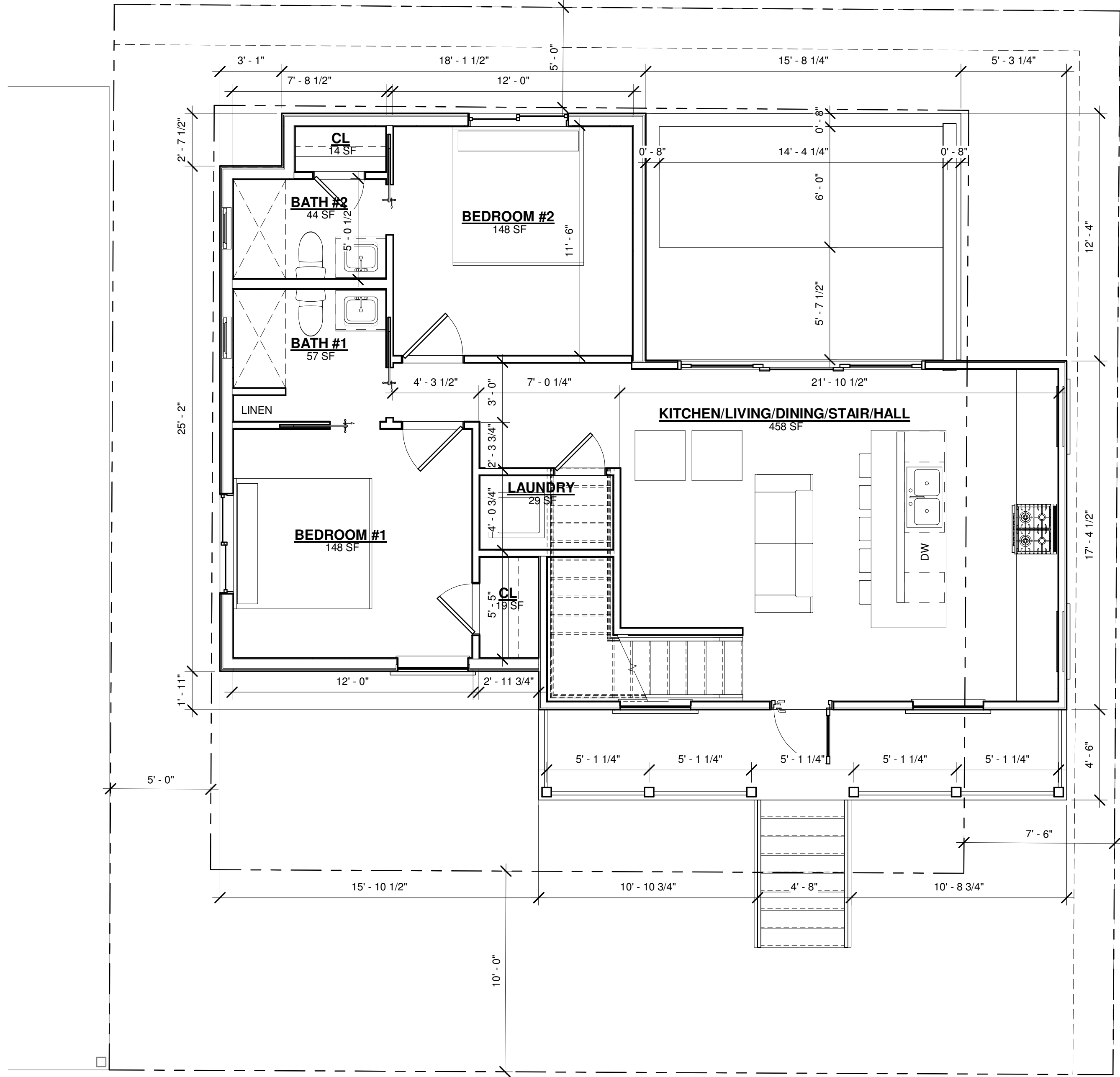
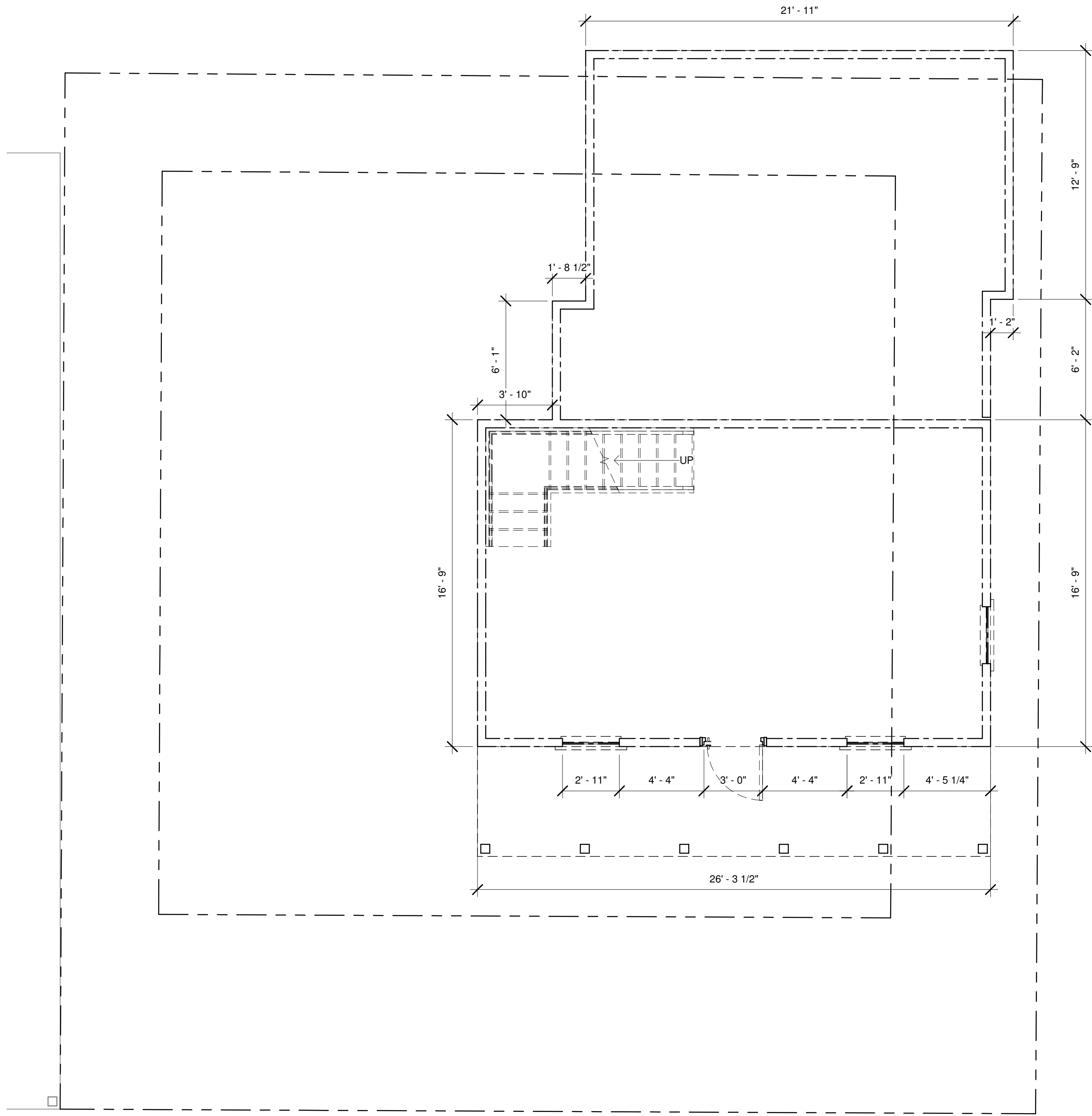


SITE PLAN

SHEET TITLE

A 2

PROJECT NO. SCH2025  
DRAWN BY: EHP  
APPROVED BY: EHP



1  
A 3  
EXISTING/DEMO 1ST FLOOR  
1/4" = 1'-0"

2  
A 3  
PROPOSED 1ST FLOOR  
1/4" = 1'-0"

DATE: 2025.04.18  
REV: 2025.04.18  
SET DESCRIPTION: HARC SUBMITTAL SET

Single Family Residence  
309 William Street  
Key West, FL 33040

SEAL:

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DESIGN STUDIO

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BIG PINE KEY, FL 33043  
WWW.SANDBARDESIGNSTUDIO.COM  
8473935854

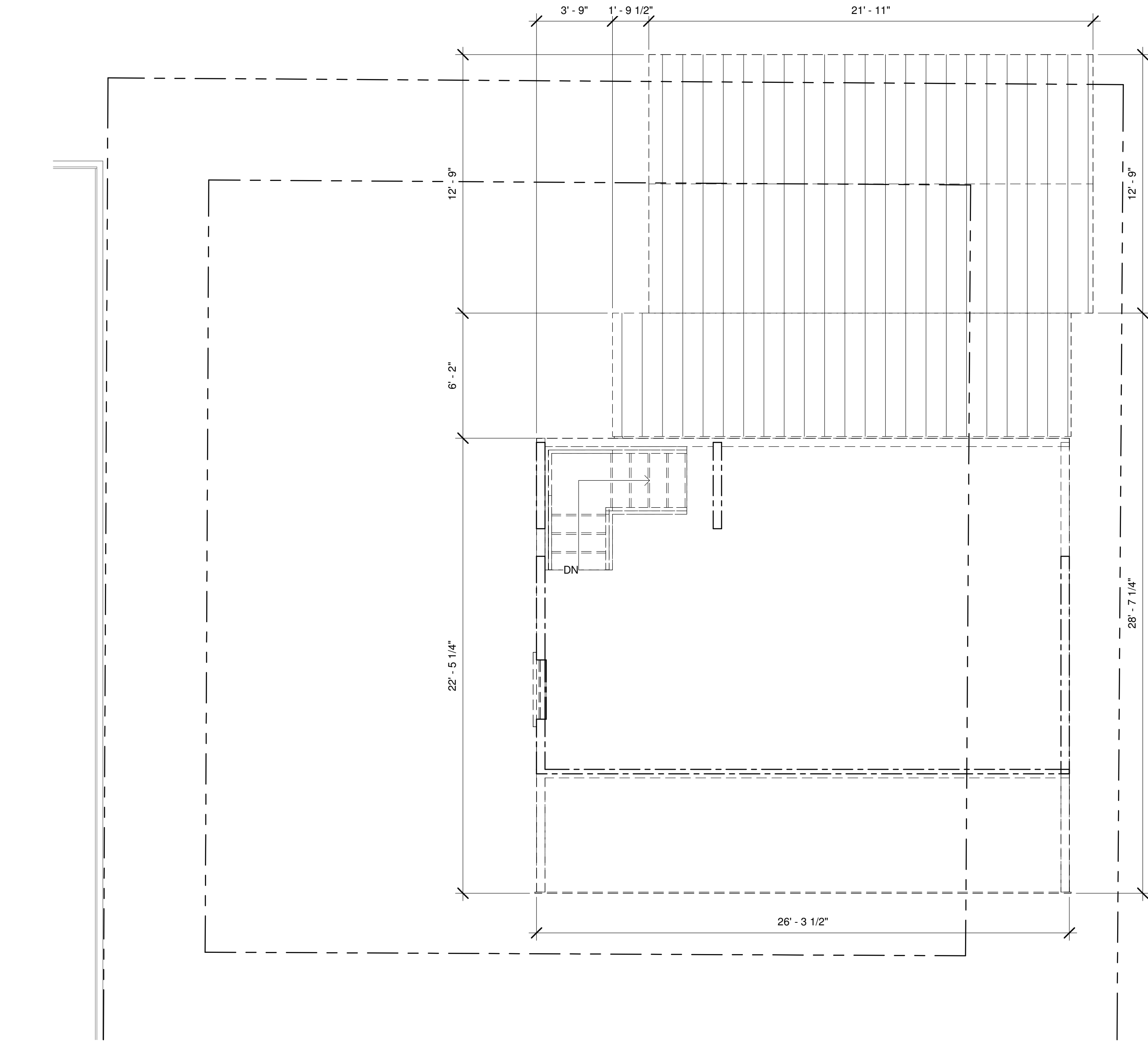
FIRST FLOOR PLANS

SHEET TITLE

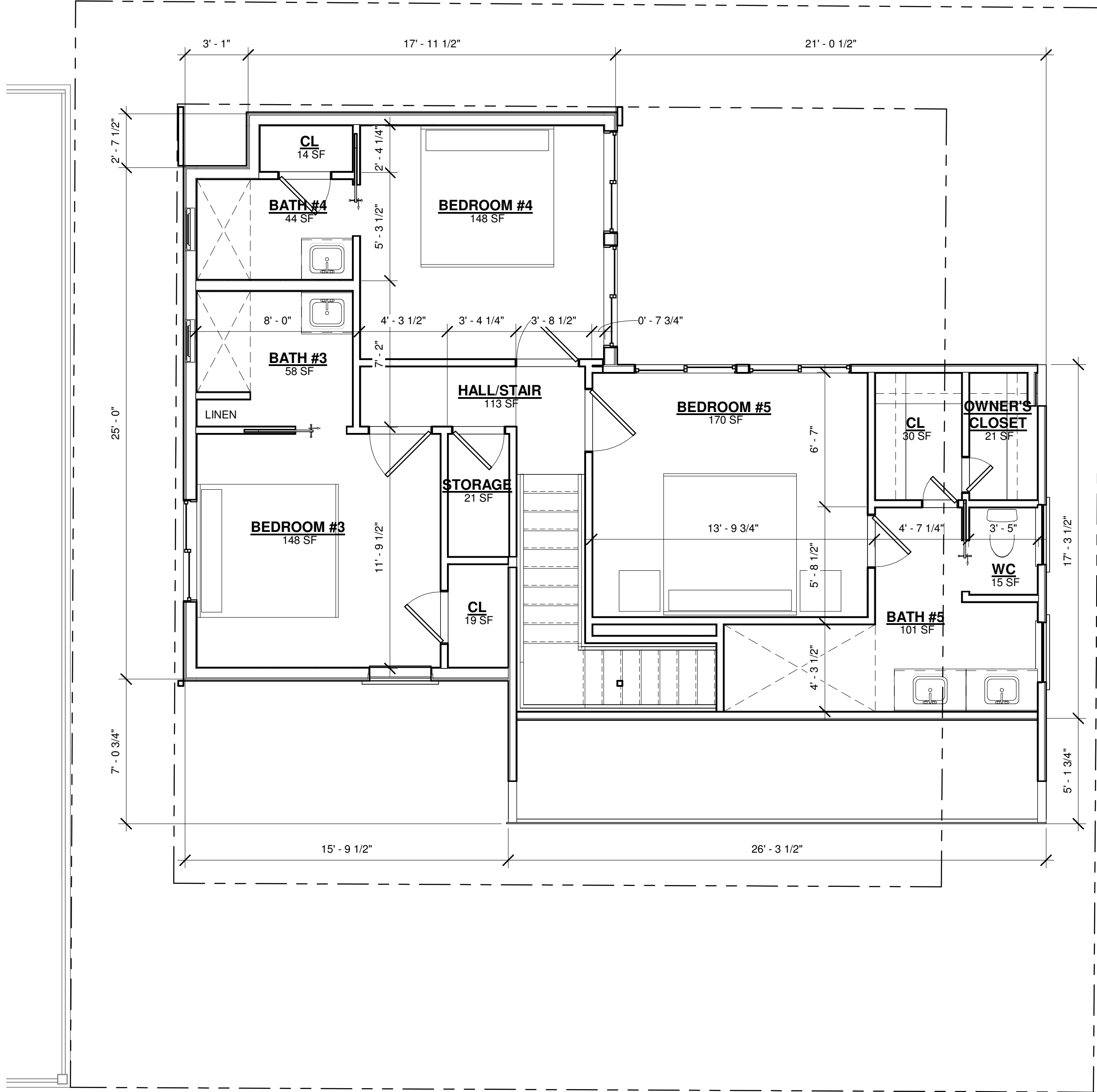
A 3

PROJECT NO: SCH2025  
DRAWN BY: EHP  
APPROVED BY: EHP





1  
A 4  
EXISTING/DEMO 2ND FLOOR  
1/4" = 1'-0"



2  
A 4  
PROPOSED 2ND FLOOR  
1/4" = 1'-0"

DATE: 2025.04.18  
REV. SET DESCRIPTION: HARC SUBMITTAL SET

Single Family Residence  
309 William Street  
Key West, FL 33040

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ERICA HELEN POOLE - ARCHITECT  
#AR98525



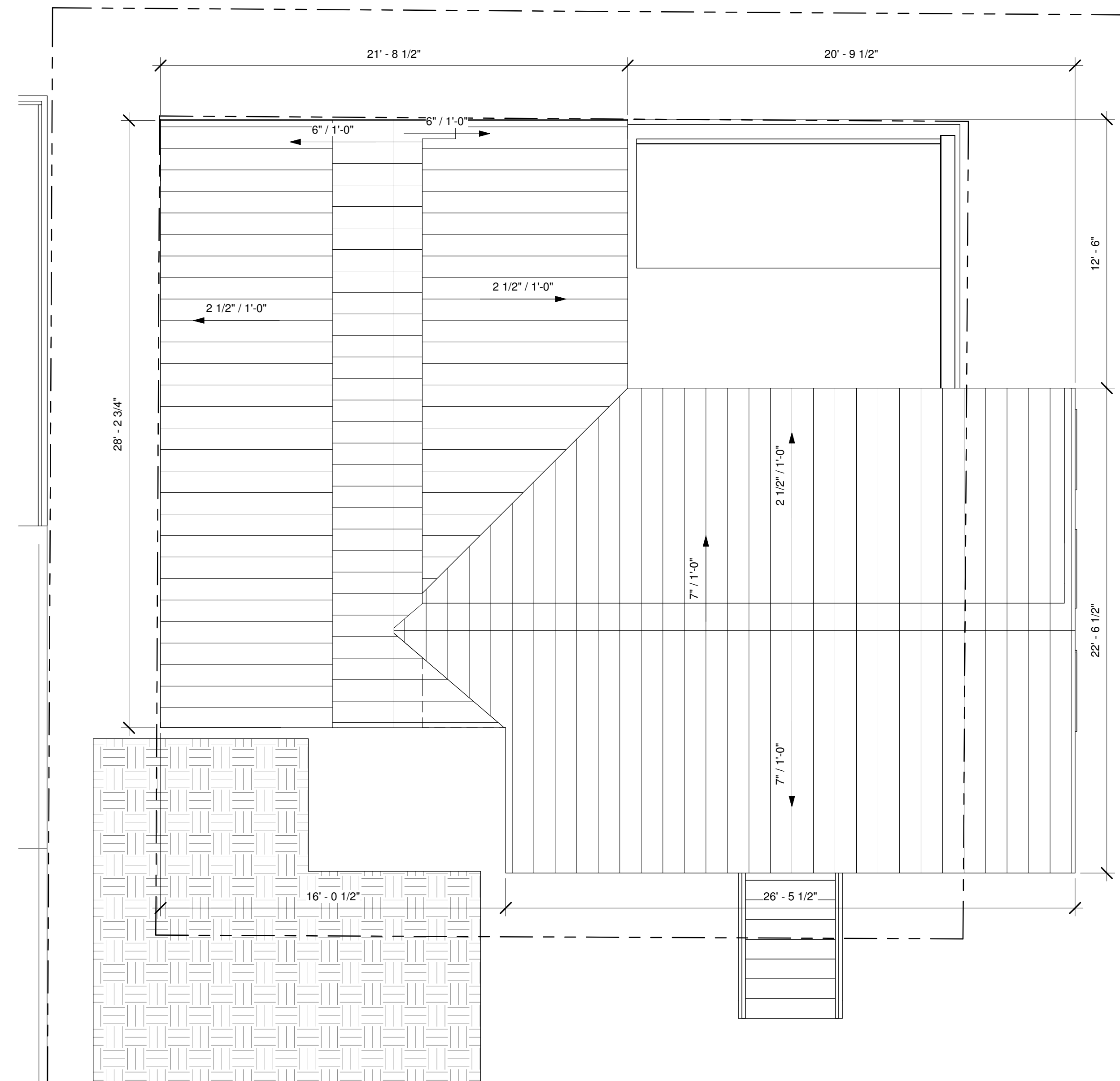
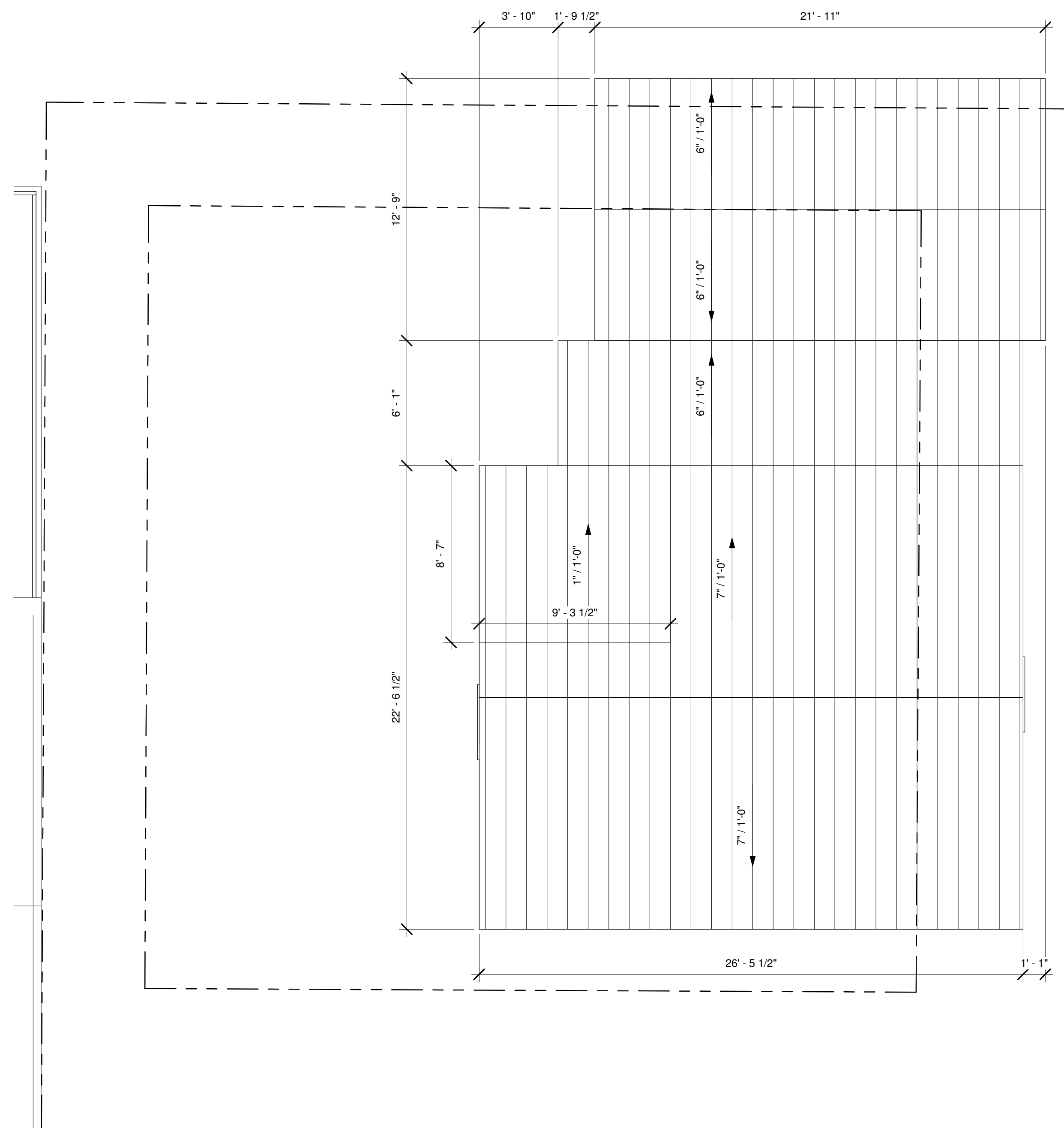
SECOND FLOOR PLAN

SHEET TITLE

A 4

PROJECT NO:  
SCH2025

DRAWN BY: Author  
APPROVED BY: Checker



N

[illegible]

**Single Family Residence**  
309 William Street  
Key West, FL 33040

SEAL:

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#AR98525



SANDBAR DESIGN STUDIO  
29183 CAMELLIA LANE  
BIG PINE KEY, FL 33043

## ROOF PLANS

*SHEET TITLE*

A 5

PROJECT NO.  
SCH2025

DRAWN BY:	Author
APPROVED BY:	Checker



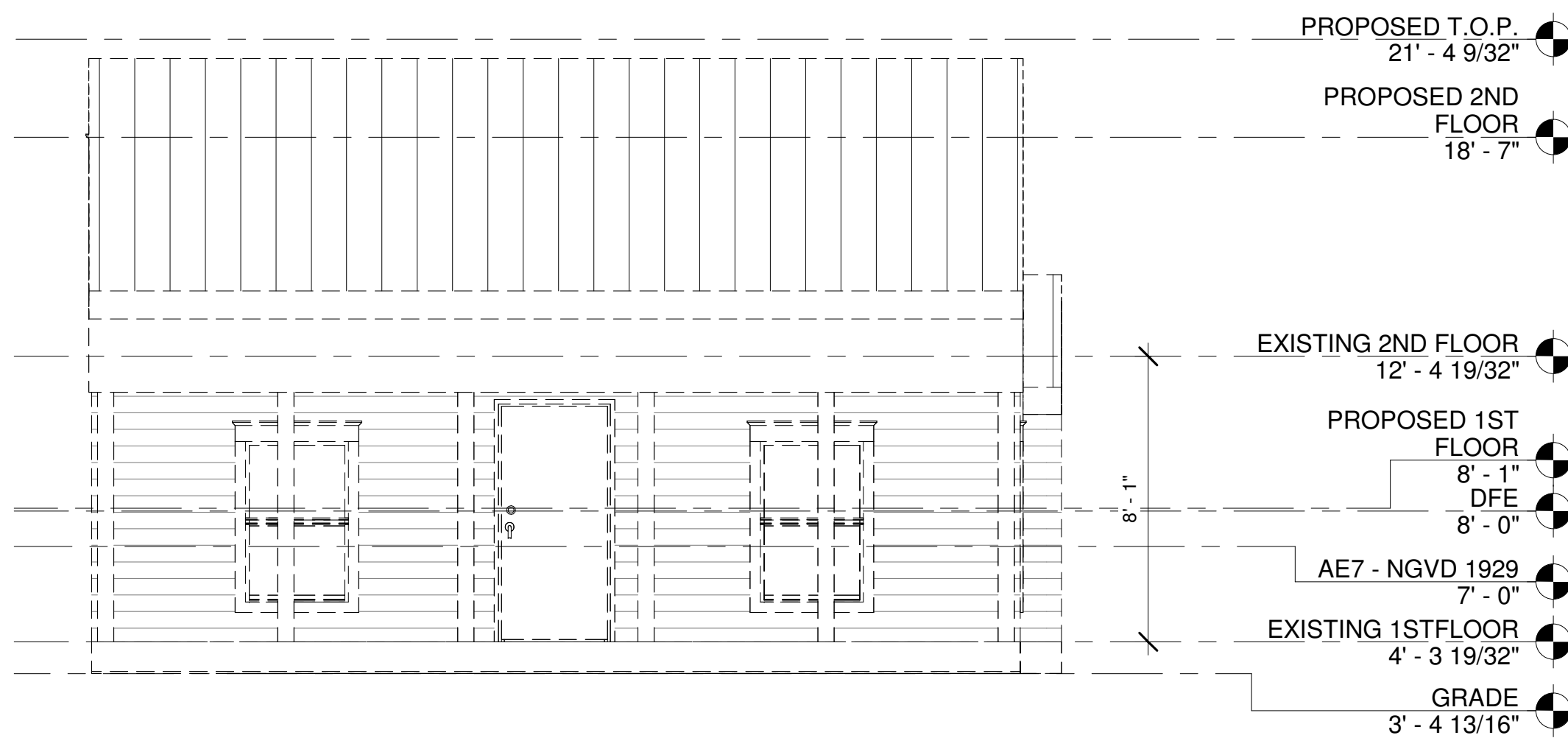
1 FRONT ELEVATION  
A 6 1/4" = 1'-0"



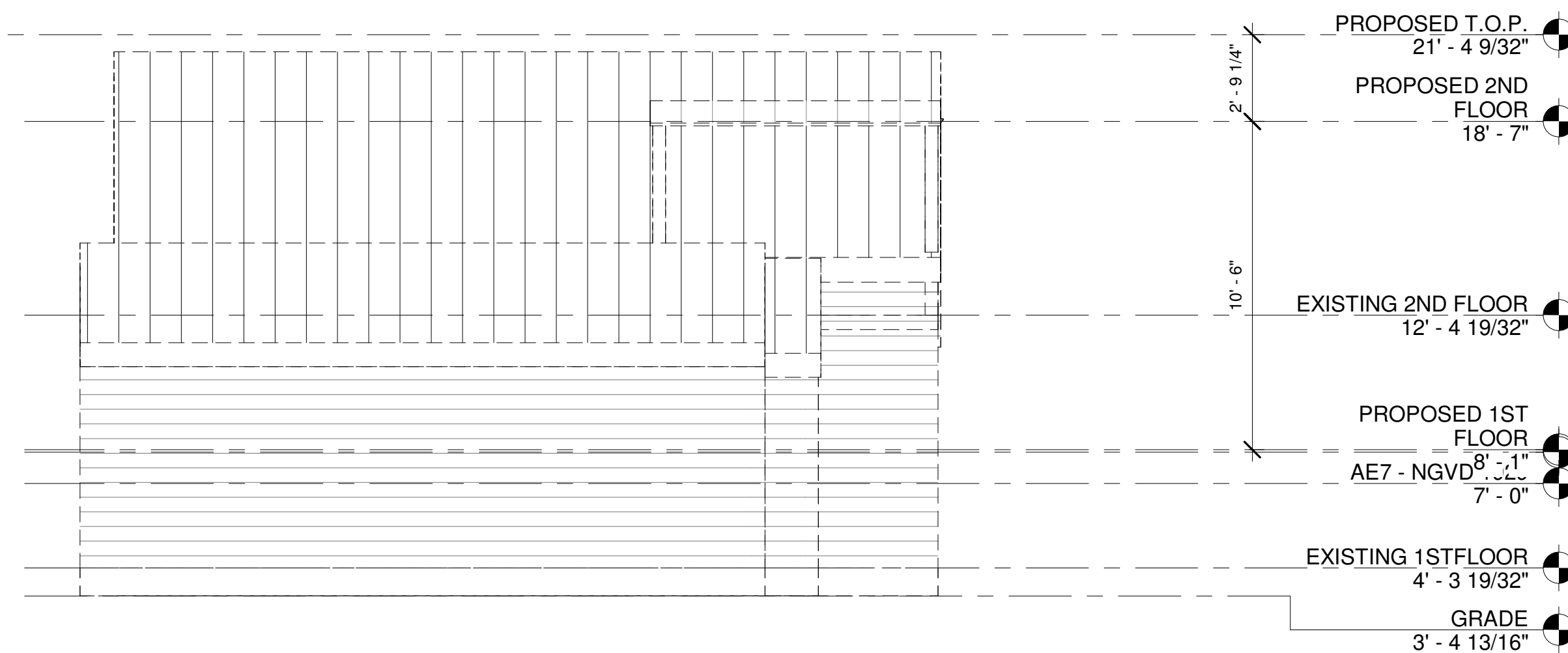
2 REAR ELEVATION  
A 6 1/4" = 1'-0"

HARC NOTES:

- EXTERIOR SIDING TO BE HARDI BOARD.
- ROOFING TO BE STANDING SEAM METAL, MILL FINISH.
- EXTERIOR SOFFITS TO BE HARDI BOARD.
- EXTERIOR WINDOW/DOOR TRIM TO BE 1X4 HARDI.
- EXTERIOR FASCIA TO BE HARDI.
- ROOFING DRIP EDGE TO MATCH FINISH OF METAL ROOF.
- GUTTERS, IF PROVIDED, TO MATCH FINISH OF DRIP EDGE & ROOFING.
- EXTERIOR WINDOWS TO HAVE MUNTIN PATTERN APPROVED BY CITY OF KEY WEST HARC STAFF.
- CONTRACTOR TO RECEIVE APPROVAL FOR FINAL PAINT COLOR SELECTIONS.
- EXTERIOR SHUTTERS TO BE WOOD, PTD. AS APPROVED BY CITY OF KEY WEST HARC STAFF.



4 FRONT ELEVATION - EXISTING/DEMO  
A 6 1/4" = 1'-0"



3 REAR ELEVATION - EXISTING/DEMO  
A 6 1/4" = 1'-0"

DATE: REV. SET DESCRIPTION  
2025 04.18 HARC SUBMITTAL SET

**Single Family Residence**  
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#AR98525

**SANDBAR**  
DESIGN STUDIO

SANDBAR DESIGN STUDIO  
20185 CAMEL JAIL LANE  
BIG PINE KEY, FL 33043  
WWW.SANDBARDESIGNSTUDIO.COM  
84719035854

ELEVATIONS

SHEET TITLE

A 6

PROJECT NO. SCH2025  
DRAWN BY: EHP  
APPROVED BY: EHP

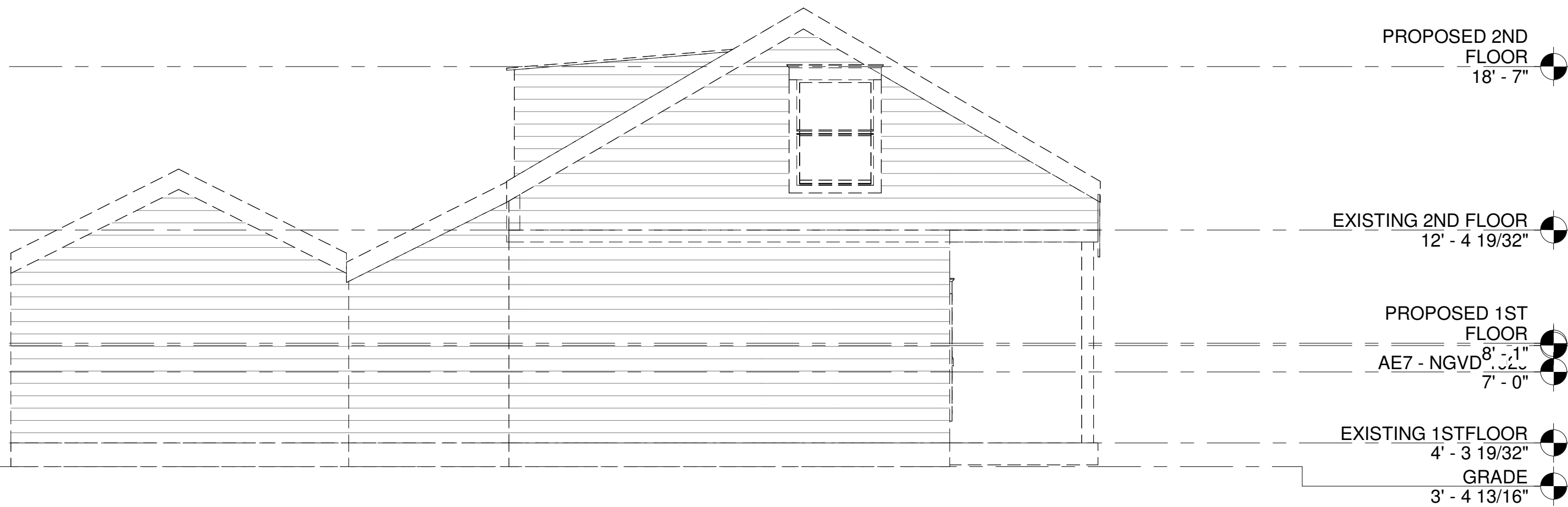




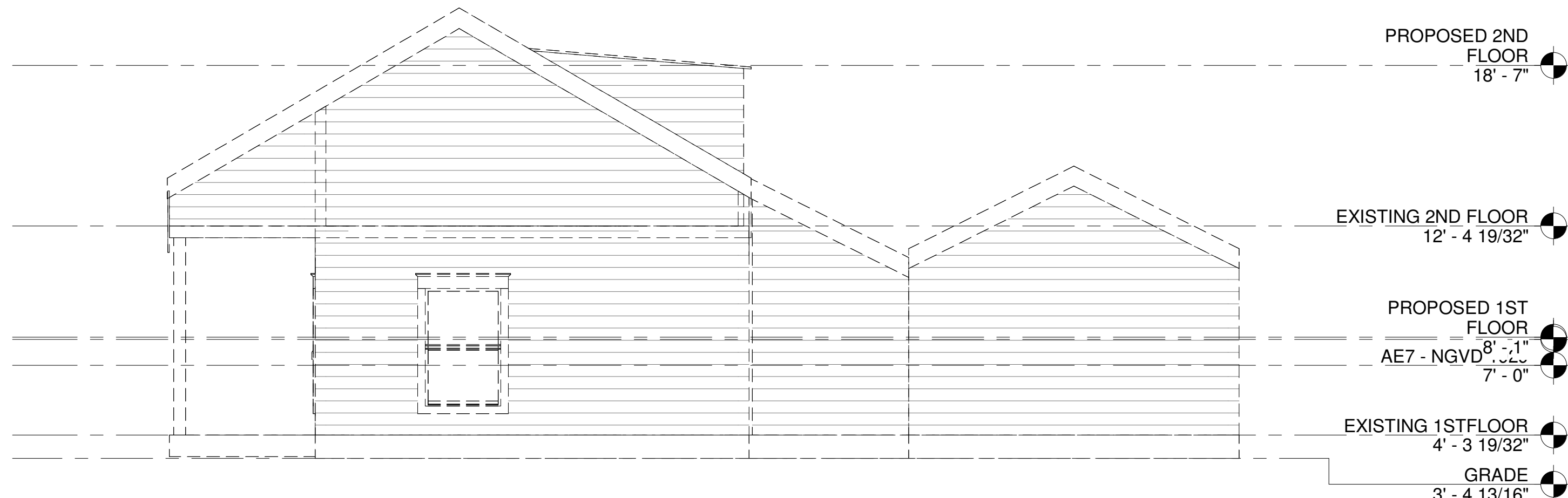
1  
A 7  
SIDE ELEVATION A  
1/4" = 1'-0"



2  
A 7  
SIDE ELEVATION B  
1/4" = 1'-0"



4  
A 7  
SIDE ELEVATION A - EXISTING/DEMO  
1/4" = 1'-0"



3  
A 7  
SIDE ELEVATION B - EXISTING/DEMO  
1/4" = 1'-0"

- HARC NOTES:
- EXTERIOR SIDING TO BE HARDI BOARD.
  - ROOFING TO BE STANDING SEAM METAL, MILL FINISH.
  - EXTERIOR SOFFITS TO BE HARDI BOARD.
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#AR98525



ELEVATIONS

SHEET TITLE

A 7

PROJECT NO.  
SCH2025

DRAWN BY: Author  
APPROVED BY: Checker

# NOTICING

# Public Meeting Notice

The Historic Architectural Review Commission will hold a public meeting at **5:00 p.m., May 27, 2025, at City Hall, 1300 White Street**, Key West, Florida. The purpose of the hearing will be to consider a request for:

**ELEVATION OF EXISTING HISTORIC TWO-STORY WOOD-FRAME RESIDENCE ABOUT 3'9", NEW ADDITION ON NORTH AND EAST SIDES, VERTICAL EXTENSION OF ROOFLINE FOR INCREASED CEILING HEIGHT, NEW FOUNDATION, NEW PORCH STAIRS, AND SITE IMPROVEMENTS. DEMOLITION OF EXISTING NON-HISTORIC REAR SHED STRUCTURES AND PARTIAL DEMOLITION OF HISTORIC STRUCTURE TO ACCOMMODATE NEW ADDITION.**

**#309 WILLIAM STREET**

**Applicant – Sandbar Design Studio, Inc    Application #C2025-0040**

If you wish to see the application or have any questions, you may visit the Planning Department during regular office hours at 1300 White Street, call 305-809-3975 or visit our website at [www.cityofkeywest-fl.gov](http://www.cityofkeywest-fl.gov).

**THIS NOTICE CAN NOT BE REMOVED FROM THE SITE UNTIL HARC FINAL DETERMINATION**

**ADA ASSISTANCE:** It is the policy of the City of Key West to comply with all requirements of the Americans with Disabilities Act (ADA). Please call the TTY number at 800-955-8771 or 800-955-8770 (Voice) or the ADA Coordinator at 305-809-3811 at least five business days in advance for sign language interpreters, assistive listening devices, or materials in accessible format.



# HARC POSTING AFFIDAVIT

STATE OF FLORIDA:  
COUNTY OF MONROE:

BEFORE ME, the undersigned authority, personally appeared TERRY GARCIA, who, first being duly sworn, on oath, depose and says that the following statements are true and correct to the best of his/her knowledge and belief:

1. That a legal notice for Public Notice of Hearing of the Historic Architectural Review Commission (HARC) was placed on the following address:

309 WILLIAM STREET, KEY WEST, FL. 33040 on the 20<sup>TH</sup> day of MAY, 2025.

This legal notice(s) contained an area of at least 8.5"x11".

The property was posted to notice a public hearing before the Key West Historic Architectural Review Commission to be held on MAY 27, 2025.

The legal notice(s) is/are clearly visible from the public street adjacent to the property.

The Certificate of Appropriateness number for this legal notice is #C2025-0040.

2. A photograph of that legal notice posted in the property is attached hereto.

Signed Name of Affiant:

[Signature]  
Date: 5/20/2025  
Address: 1321 ASHBY STREET  
City: KEY WEST  
State, Zip: FL., 33040

The forgoing instrument was acknowledged before me on this 20<sup>TH</sup> day of MAY, 2025.

By (Print name of Affiant) TERRY GARCIA who is personally known to me or has produced \_\_\_\_\_ as identification and who did take an oath.

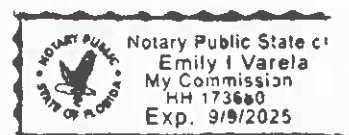
## NOTARY PUBLIC

Sign Name: [Signature]

Print Name: Emily Varela

Notary Public - State of Florida (seal)

My Commission Expires: 9-9-25







# PROPERTY APPRAISER INFORMATION



# Monroe County, FL

## \*\*PROPERTY RECORD CARD\*\*

### Disclaimer

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the data is intended for ad valorem tax purposes only and should not be relied on for any other purpose.

By continuing into this site you assert that you have read and agree to the above statement.

### Summary

Parcel ID 00003170-000000  
 Account# 1003298  
 Property ID 1003298  
 Millage Group 12KW  
 Location Address 309 WILLIAM St, KEY WEST  
 Legal Description KW PT LOT 3 SQR 21 OR147-87 OR844-1796 OR3279-1749 OR3279-1750 OR3297-2101 OR3303-158 OR3311-1655  
 (Note: Not to be used on legal documents.)  
 Neighborhood 6108  
 Property Class SINGLE FAMILY RESID (0100)  
 Subdivision  
 Sec/Twp/Rng 06/68/25  
 Affordable No  
 Housing



### Owner

SCHMITZ CRAIG A TRUST 02/04/2016  
 23 Windcastle Dr  
 Saint Charles MO 63304

### Valuation

	2024 Certified Values	2023 Certified Values	2022 Certified Values	2021 Certified Values
+ Market Improvement Value	\$101,085	\$95,285	\$95,285	\$83,628
+ Market Misc Value	\$394	\$394	\$394	\$394
+ Market Land Value	\$1,113,636	\$933,489	\$723,318	\$534,982
= Just Market Value	\$1,215,115	\$1,029,168	\$818,997	\$619,004
= Total Assessed Value	\$686,755	\$153,784	\$149,305	\$144,957
- School Exempt Value	(\$25,000)	(\$25,000)	(\$25,000)	(\$25,000)
= School Taxable Value	\$661,755	\$128,784	\$124,305	\$119,957

### Historical Assessments

Year	Land Value	Building Value	Yard Item Value	Just (Market) Value	Assessed Value	Exempt Value	Taxable Value	Maximum Portability
2024	\$1,113,636	\$101,085	\$394	\$1,215,115	\$686,755	\$25,000	\$661,755	\$500,000
2023	\$933,489	\$95,285	\$394	\$1,029,168	\$153,784	\$25,000	\$128,784	\$500,000
2022	\$723,318	\$95,285	\$394	\$818,997	\$149,305	\$25,000	\$124,305	\$500,000
2021	\$534,982	\$83,628	\$394	\$619,004	\$144,957	\$25,000	\$119,957	\$474,047
2020	\$530,888	\$85,121	\$394	\$616,403	\$142,956	\$25,000	\$117,956	\$473,447
2019	\$559,548	\$86,614	\$394	\$646,556	\$139,742	\$25,000	\$114,742	\$500,000
2018	\$492,675	\$86,614	\$394	\$579,683	\$137,137	\$25,000	\$112,137	\$442,546

The Maximum Portability is an estimate only and should not be relied upon as the actual portability amount. Contact our office to verify the actual portability amount.

Land

Land Use	Number of Units	Unit Type	Frontage	Depth
RESIDENTIAL DRY (010D)	2,650.00	Square Foot	53	50

Buildings

Building ID	167	Exterior Walls	WD FRAME
Style	2 STORY ELEV FOUNDATION	Year Built	1924
Building Type	S.F.R. - R1 / R1	EffectiveYearBuilt	1975
Building Name		Foundation	WD CONC PADS
Gross Sq Ft	1562	Roof Type	GABLE/HIP
Finished Sq Ft	860	Roof Coverage	METAL
Stories	1 Floor	Flooring Type	SFT/HD WD
Condition	GOOD	Heating Type	NONE with 0% NONE
Perimeter	128	Bedrooms	2
Functional Obs	0	Full Bathrooms	1
Economic Obs	0	Half Bathrooms	0
Depreciation %	49	Grade	450
Interior Walls	WALL BD/WD WAL	Number of Fire Pl	0

Code	Description	Sketch Area	Finished Area	Perimeter
FHS	FINISH HALF ST	572	0	0
FLA	FLOOR LIV AREA	860	860	0
OPF	OP PRCH FIN LL	130	0	0
TOTAL		1,562	860	0

Yard Items

Description	Year Built	Roll Year	Size	Quantity	Units	Grade
CH LINK FENCE	1949	1950	0 x 0	1	306 SF	1
CONC PATIO	1949	1950	0 x 0	1	40 SF	1

Sales

Sale Date	Sale Price	Instrument	Instrument Number	Deed Book	Deed Page	Sale Qualification	Vacant or Improved	Grantor	Grantee
2/10/2025	\$1,125,000	Warranty Deed	2489539	3311	1655	19 - Unqualified	Improved		
12/9/2024	\$0	Order (to be used for Order Det. Heirs, Probate in	2482978	3303	158	19 - Unqualified	Improved		
10/25/2024	\$0	Order (to be used for Order Det. Heirs, Probate in	2478859	3297	2101	30 - Unqualified	Improved		

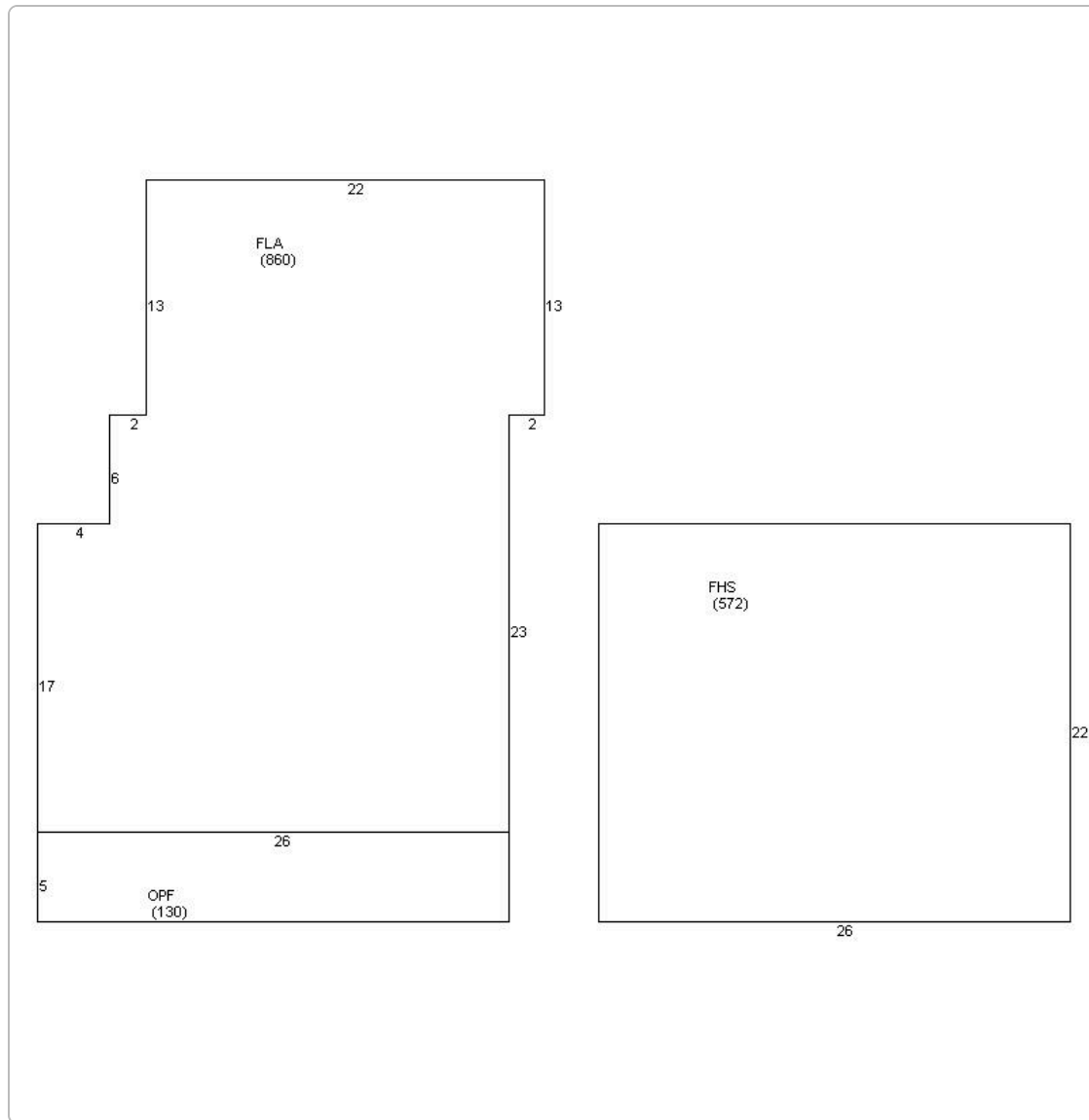
Permits

Number	Date Issued	Status	Amount	Permit Type	Notes
16-1868	05/12/2016	Completed	\$5,860		INSTALL 400SF OF VCRIMP ON FRONT ROOF
10-2412	07/26/2010	Completed	\$2,470		INSTALL 300sf 3 SQRS OF VCRIMP ON REAR AREA OF MAIN ROOF

View Tax Info

[View Taxes for this Parcel](#)

Sketches (click to enlarge)



## Photos





Map



TRIM Notice



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