



CODE COMPLIANCE DIVISION

Amnesty Program Application

Applicant Name _____

Property Owners Name _____

Date of Application _____

Property Address _____

Folio No. _____

Email Address _____

Contact Number of Owner _____

Mailing Address of Owner _____

Code Enforcement Case No.(s) _____

Homestead yes no If yes submit proof of homestead, including tax bill, utility bills, and copy of driver's license.

Amount of reduction as determined by the City Manager for outstanding liens.

\$ _____

Detail of Civil Violation Notices and total amounts due

By execution of this agreement, I acknowledge and consent to the City filing a lien against my property in consideration for the reduced lien amount. I understand that if I sell the subject property within thirty-six (36) months from the date of execution, I will be required to repay the full amount of the original lien.

Print name of Property Owner _____

Signature of Property Owner _____

Date _____

State of Florida, County of Miami-Dade

The foregoing instrument was acknowledged before me this _____ day of _____ 20____, by _____, who is personally known or has produced a driver's license as identification.

[Notary Seal]

Notary Public

My Commission Expires _____

Printed Name

FOR CODE COMPLIANCE DEPARTMENT USE ONLY

Application fee received yes no

Date of Lien Recordation _____

Commercial or Residential _____

Date of compliance _____

Date of last Inspection and Compliance Affidavit _____

(Submit along with Application)

Accrued Lien amount \$ _____

Inspector's name _____

Recommended lien reduction \$ _____

Code Department Approval

City Manager Approval

* Non-refundable Application Fee is due at time of submittal per property

\$100- Residential property

\$500- Commercial property