



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 will be 5% of total outstanding liens (Hard Cost Liens and fees are non-negotiable)
 \$ _____

Detail of Civil Violation Notices and total amounts due

 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 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 \$ _____ (5% Amnesty program)

 Code Department Approval

 City Manager Approval

*\$82.95 Non-refundable Application Fee is due at time of submittal per property
 CMG_01-41 9/12