



DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES

Building Code Amnesty Program Application

Property Owner's Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Property Address \_\_\_\_\_ Folio No. \_\_\_\_\_

Mailing Address of Owner \_\_\_\_\_

Telephone/Contact Number of Owner \_\_\_\_\_ Case No. \_\_\_\_\_

Please submit proof of ownership (driver's license, copy of Warranty Deed, Quit Claim Deed and/or tax bill).

Detail of Civil Violation Notices and total amounts due: \_\_\_\_\_

Signature of Property Owner

Date

State of Florida
County of Miami-Dade

Sworn to (or affirmed) and subscribed before me by means of (how the individual appeared check one):

physical presence online notarization this \_\_\_ day of \_\_\_, 20\_\_.

by \_\_\_\_\_

(name of individual swearing or affirming)

Individual identified by: personal knowledge satisfactory evidence \_\_\_\_\_.

(type)

(Signature of Notary Public)

(typed, printed, or stamped name of Notary Public)

(Affix Florida Notary Seal above)