

**MIAMI-DADE COUNTY
APPLICATION FOR PUBLIC HEARING FOR A
CHANGE IN ZONING REGULATIONS**

*AMOUNT OF FEE: \$1,272.31

Total including applicant fee, imaging fee and 8% surcharge

Date Receipt Stamp

PROCESS NUMBER: _____

This application, with all supplemental data and information, must be completed and filed with the MIAMI-DADE COUNTY DEPARTMENT OF PLANNING AND ZONING in accordance with regulations contained in Chapter 33, Code of Miami-Dade County, before the same will be advertised for hearing.

IMPORTANT: The applicant or applicant's representative must be present at the hearing.

1. Name of Applicant (PRINT) _____

2. Mailing Address _____

3. Telephone No. _____ FAX _____

4. Section and paragraph of zoning regulations to be amended:
(State number, and copy in detail the phraseology of the existing regulation to be amended).
Include attachments, if necessary.

5. Phraseology of the proposed amendment of regulations:
(If part of the regulation is to remain, the new part is to be underscored). Include
attachments, if necessary.

6. Please give the reason why the application should be approved.

7. Photos, plans, specifications, and other data as the same may be applicable, should be
attached to the application.

Applicant's affidavit is also required with this application.

***NOTE: AN 8% SURCHARGE WILL BE ADDED TO ALL FEES EXCEPT DERM AND
CONCURRENCY.**

APPLICANT'S AFFIDAVIT
OWNER OR TENANT AFFIDAVIT

I, being first duly sworn, depose and say that I am the owner tenant of the property described and which is the subject matter of the proposed hearing; that all the answers to the questions in this application, and all sketch data and other supplementary matter attached to and made a part of the application are honest and true to the best of my knowledge and belief. I understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

Signature

Sworn to and subscribed to before me
this ____ day of _____, _____

Notary Public

Commission Expires _____

CORPORATION AFFIDAVIT

We, _____, being first duly sworn, depose and say that we are the President Vice President, and Secretary Asst. Secretary of the aforesaid corporation, and as such, have been authorized by the corporation to file this application for public hearing; that all answers to the questions in said application and all sketches, data and other supplementary matter attached to and made a part of this application are honest and true to the best of our knowledge and belief; that said corporation is the owner tenant of the property described herein and which is the subject matter of the proposed hearing. We understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

President's Signature

(Corp. Seal)

ATTEST:

Secretary's Signature

Sworn to and subscribed to before me
this ____ day of _____,

Notary Public

Commission Expires _____

PARTNERSHIP AFFIDAVIT

We, the undersigned, being first duly sworn depose and say that we are partners of the hereinafter named partnership, and as such, have been authorized to file this application for a public hearing; that all answers to the questions in said application and all sketches, data, and other supplementary matter attached to and made a part of this application are honest and true to the best of our knowledge and belief; that said partnership is the owner/ tenant of the property described herein which is the subject matter of the proposed hearing. We understand this application must be complete and accurate before the application can be submitted and hearing advertised.

Name of Partnership)

By _____ %

By _____ %

By _____ %

By _____ %

Sworn to and subscribed to before me
this ____ day of _____, _____.

Notary Public
Commission Expires _____

ATTORNEY AFFIDAVIT

I, _____, being first duly sworn, depose and say that I am a State of Florida Attorney at Law, and I am the Attorney for the Owner of the property described and which is the subject matter of the proposed hearing; that all answers to the questions in this application, and all sketch data and other supplementary matter attached and made a part of this application are honest and true to the best of my knowledge and belief. I understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

Signature

Sworn to and subscribed to before me
this ____ day of _____, _____.

Notary Public
Commission Expires _____