GROUP HOME APPLICATION CHECKLIST

The following items **must** be submitted:

- ☐ **Completed Spacing Reservation Application Form**
- ☐ **Signed Acceptance of Terms Page**
- ☐ **Letter of intent** (providing information on the proposed uses, number of residents to be served and proposed agency license and other relevant information regarding the proposed group home)
- ☐ **Findings from spacing survey**
- ☐ **Legal description** (can provide a copy of property appraiser's web page)
- ☐ **Applicant's Checklist**
- ☐ **Copy of current Group Home license on property if making a change in operator or owner**
- ☐ **Affidavit of Consent from Property Owner(s)** (signed by the property owner(s), witnessed, and notarized, providing consent of the owner(s) to the application for a dispensing facility on the property.)
- ☐ **Proof of Authority** (proof of authority or a power of attorney may be required to demonstrate the authorization to sign on behalf of the Group Home applicant)
- ☐ **Group Home Spacing Survey** (the survey shall comply with the Instructions for surveyors provided in this packet and must show that the proposed site for the dispensing facility complies with the spacing requirements in Section 33-199(10) of the Miami-Dade County Code)
- ☐ **Payment of $237.77 in Money Order or Cashier's Check made payable to Miami-Dade County**

APPLICATION INSTRUCTIONS TO ESTABLISH A GROUP HOME/ALF

The Department will review the application packet for completeness and will not accept a package that is incomplete. The Department does not have a wait list; applications are processed on a first-come, first-served basis. Please be advised that the required spacing survey reflects the spacing from group homes licensed by the State of Florida and does not include the list of group home properties that are reserved in the Miami-Dade County Group Home database which can change on a daily basis.

Group Home/ALF Application: A Group Home/ALF Application packet consists of the following:

1) A brief letter of intent to explain the type of application being requested (new home, operator or owner change, etc.) accompanied by this form signed by the applicant/operator.
2) Payment of $237.77 in MONEY ORDER or CASHIER'S CHECK made payable to Miami-Dade County.
3) The property owner's affidavit of consent (signed, witnessed and notarized) to use the property for a group home. If there is more than one owner then all owners must sign the affidavit.
4) A legible photocopy of the proposed operator's and property owner(s) driver's licenses.
5) A spacing survey in substantially the same form as the example provided prepared, signed and sealed by a licensed surveyor certifying that there are no other legally established group homes within 1,000 feet of the proposed group home.

If the site complies with Zoning and spacing regulations, the Department will issue a letter indicating the aforementioned and will "reserve" the site for **180 days (6 months)**. The Department will issue a letter to the applicant within ten (10) working days indicating the site's compliance or non-compliance with Zoning Code regulations. **It is important to note that the State of Florida requires the spacing verification letter indicating compliance with zoning regulations prior to obtaining a license**.

A SITE WITH A CLOSED/EXPIRED LICENSE WILL BE TREATED AS A NEW SITE AND MUST COMPLY WITH THE 1,000-FOOT SPACING REQUIREMENT, AS WELL AS ALL OTHER REQUIREMENTS FOR A NEW GROUP HOME RESERVATION.

Request for Extension: **If you need additional time to obtain your license from the State, you must submit a request for an extension 15 days before the six-month reservation expires**. The expiration date can be found in the Department's Spacing Verification Letter. An extension request must include Items #1-4 above, including payment of $237.77 in MONEY ORDER or CASHIER'S CHECK made out to Miami-Dade County. The letter of intent must explain the reason for the delay, and include the following documentation: proof of application for the State license and copies of building permits, including inspection results. **Failure to timely request an extension could result in the removal of the site's "reserved" status.** The Department will not reserve a site for more than two consecutive six-month periods.

Name Change / Operator Change: A request for a name change or operator change on a site will require Items #1-4 above, including a processing fee of $237.77 in MONEY ORDER or CASHIER'S CHECK made out to Miami-Dade County. In order to make such a change, the State's internet site must show a licensing status of open/active. The applicant shall have 180 days to complete the change/transfer.

ONCE YOU RECEIVE YOUR LICENSE FROM THE STATE, YOU MUST SUBMIT A COPY TO THE DEPARTMENT. FAILURE TO SUBMIT A COPY OF YOUR LICENSE TO THE DEPARTMENT PRIOR TO THE EXPIRATION OF YOUR RESERVATION COULD RESULT IN THE RELEASE OF YOUR RESERVATION AND FAILURE TO COMPLY WITH ZONING REGULATIONS.

PLEASE BE AWARE THAT IT IS YOUR RESPONSIBILITY TO ADHERE TO THE DEADLINES AND SUBMITAL REQUIREMENTS.

If an application for a site reservation does not comply with spacing or other Zoning regulations, the applicant may choose to file an application for public hearing on the 11th floor of the Government Center. Said application will be heard by the Community Council of the area and the Council will determine whether or not to approve the request.

Applicant/Operator's acceptance of terms:

I _____ (print name) acknowledge and agree to the foregoing procedures and application terms to obtain and maintain a group home spacing reservation.

_____ _____ _____

Operator/Applicant Name Operator/Applicant Signature Date

Last revised 9/22/16

RESERVATION FOR GROUP HOME/ ASSISTED LIVING FACILITY FOR UP TO SIX RESIDENTS

Application Date: _____

Type: ____ New Application ____ Reservation Extension Request ____ Change of Owner or Operator

Type of Proposed State License:

____ AHCA -- Agency for Health Care Administration
____ APD – Agency for Persons with Disabilities

Applicant /Operator Contact Information

Name: _____

Business Mailing Address: _____

Email Address (required): _____

Telephone: Cellular_____ Office: _____

Group Home Location Information

Facility Name: _____

Parcel folio number: 30-_____

Facility Address: _____

City_____ State_____ ZIP Code_____

Group Home Property Owner Contact Information

Name: _____

Business Mailing Address: _____

Email Address (required): _____

Telephone: Cellular_____ Office: _____

++

FOR OFFICE USE ONLY

Processed By: _____ Date: _____

GH PROCESS # _____ ZONING DISTRICT _____

INVOICE # _____ COLLECTION # _____

CHECK # _____ MONEY ORDER # _____

GROUP HOME OWNERSHIP
AFFIDAVIT FOR CORPORATION

STATE OF_____ _ **Group Home App No. _____ _**
COUNTY OF_____ _

Before me, the undersigned authority, personally appeared _____ hereinafter the Affiant(s), who being first duly sworn by me, on oath, deposes and says:

1, Affiant is the president, vice-president or CEO of the Corporation hereinafter named _____, with the following address:
_____

2. The Corporation owns the property which is the subject of the proposed Group Home site.
3, The subject property is legally described as:
_____
_____
_____
_____

4, Affiant is legally authorized to file this application for Group Home spacing reservation.
5, Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

_____	_____
Signature	Affiant's Signature
_____	_____
Print Name	Print Affiant's Name
_____	_____
Signature	Affiant's Signature
_____	_____
Print Name	Print Affiant's Name

Sworn to and subscribed before me on the __ day of _____ 20__ _ .

Affiant is personally known to me or has produced _____ as identification.

Notary _____

(Stamp/Seal)

Commission Expires: _____ _

GROUP HOME SITE OWNERSHIP
AFFIDAVIT FOR INDIVIDUAL(S)

STATE OF _____ **GH Application No.**_____

COUNTY OF_____

Before me, the undersigned authority, personally appeared_____, hereinafter the Affiant, who being first duly sworn by me, on oath, deposes and says:

1. Affiant is the fee owner of the property that is the subject of the proposed Group Home.

2. The subject property is legally described as:

_____

_____

_____

_____

3. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Witnesses:

_____	_____
Signature	Affiant's Signature
_____	_____
Print Name	Print Affiant's Name
_____	_____
Signature	Affiant's Signature
_____	_____
Print Name	Print Affiant's Name

Sworn to and subscribed before me on the_____ day of_____, 20_____

Affiant is personally known to me or has produced_____as identification.

Notary _____

(Stamp/Seal)

Commission Expires: _____

GROUP HOME APPLICANT'S AFFIDAVIT

The Undersigned, first being duly sworn depose that all answers to the questions in this application, and all supplementary documents made a part of the application are honest and true to the best of (my)(our) knowledge and belief. (I)(We) understand this application for a group home spacing letter must be complete and accurate before the application can be submitted and the spacing letter issued.

****

OWNER OR TENANT AFFIDAVIT

(I)(WE), _____, being first duly sworn, depose and say that (I am)(we are) the ☐ owner ☐ tenant of the property described and which is the subject matter of the proposed hearing.

_____ Signature

_____. Signature

Sworn to and subscribed to before me
this_____day of_____,_____.

Notary Public:_____
Commission Expires:

****

CORPORATION AFFIDAVIT

(I)(WE),_____, being first duly sworn, depose and say that (I am)(we are) the ☐ President ☐ Vice-President ☐ Secretary ☐ Asst. Secretary of the aforesaid corporation, and as such, have been authorized by the corporation to file this application for a group home spacing letter; and that said corporation is the ☐ owner ☐ tenant of the property described herein and which is the subject matter of the proposed hearing.

Attest: _____

_____ Authorized Signature

_____ Office Held

(Corp. Seal)

Sworn to and subscribed to before me
this_____day of_____,_____.

Notary Public:_____
Commission Expires:

****

PARTNERSHIP AFFIDAVIT

(I)(WE),_____,being first duly sworn, depose and say that (I am)(we are) partners of the aforesaid partnership, and as such, have been authorized to file this application for a group home spacing letter; and that said partnership is the ☐ owner ☐ tenant of the property described herein which is the subject matter of the proposed hearing.

_____
(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 Group Home applicant applying for the proposed group home spacing letter hearing.

_____
Signature

Sworn to and subscribed to before me

this_____day of_____,_____.

Notary Public:_____

Commission Expires _____

Instructions to Surveyors for the Spacing Survey for a Group Home

Pursuant to Section 33-1(53.1) of the Miami-Dade County Code, a group home is a dwelling unit licensed by the State of Florida Department of Health and Rehabilitative Services which is licensed to serve resident clients and which provides a living environment for not more than six (6) unrelated residents who operate as a functional equivalent of a family. Supervisory and supportive staff as may be necessary to meet the physical, emotional, and social needs of the resident clients shall be excluded in said count.

In accordance with Sec. 33-199(10) of this Code, a group home shall be permitted in a dwelling unit provided:

- The total number of residents on the premises shall not exceed six (6) in number;
- That the operation of the facility be licensed by the State of Florida and that the group home be licensed no later than at the time of occupancy
- The structure used for a group home shall be located at least 1,000 feet from another legally existing, unabandoned legally established legally established group home

In order to establish a group home, an applicant must provide a spacing survey (the "survey") in substantially the same form as provided in the instructions herein:

1. **<u>For Zoning Districts other than Urban Center Districts:</u>**
    a. The survey shall identify all group home facilities within a 1,000 foot radius of the proposed group home. Distances shall be measured by following a straight line from the nearest portion of the structure of the proposed use to the nearest portion of the structure of the existing use.
    b. A radius map showing the required distances and routes as described above shall be included. The map must clearly depict a ring buffer showing the 1,000-foot radii, with a label for the radius.

2. **<u>For Urban Center Districts:</u>**
    a. In the R category, group residential homes shall meet the requirements outlined in Section 33-199(10) of this chapter.

    b. In the RM, MC, MM, MO, MCS, and MCI categories, group residential homes shall meet the following requirements:

i. Three (3) occupants shall be deemed to be one (1) dwelling unit, and the maximum number of dwelling units allowed shall be equal to the permitted residential density.

ii. The proposed group residential home shall not be located within a radius of one thousand two hundred (1,200) feet of another existing, unabandoned, legally established group residential home.

iii. The 1,200-foot distance requirement shall be measured by following a straight line from the nearest portion of the structure of the proposed use to the nearest portion of the structure of the existing use.

c. A radius map showing the required distances and routes as described above shall be included. The map must clearly depict a ring buffer showing the both the 1,000-foot and 1,200 foot radii, with a label for each radius.

3. **<u>The legend must include the following:</u>**

a. Name, Address, folio(s), and legal description of the proposed site of the group home.

b. Date of survey.

c. Purpose:

"The purpose of the survey is to locate all group home facilities within 1,000 feet of the proposed group home if in a non-Urban Center District;" or
"The purpose of the survey is to locate all group home facilities within 1,000 feet of the proposed group home in an R category Urban Center District;" or
"The purpose of the survey is to locate all group home facilities within 1,200 feet of the proposed group home in an RM, MC, MM, MO, MCS, and MCI category Urban Center District."

4. **<u>Methodology:</u>**

Explain the method used to locate and identify the above establishments / properties. Surveyors may use the links listed below for assistance in searching for sites, however, it is the surveyor's responsibility to ensure that the survey includes all relevant sites, regardless of whether such sites are included in any of the below listed websites.

- Agency for Health Care Administration:

  http://www.floridahealthfinder.go/

- Department of Children and Families:
  http://www.myflfamilies.com/
- Agency for Persons with Disabilities:
  http://apd.myflorida.com/

5. **Surveyor's Notes:**

If applicable, a list of all sites found within the required radius of the proposed site. (Include name of the establishment, address, and prescribed distance from proposed Group Home.

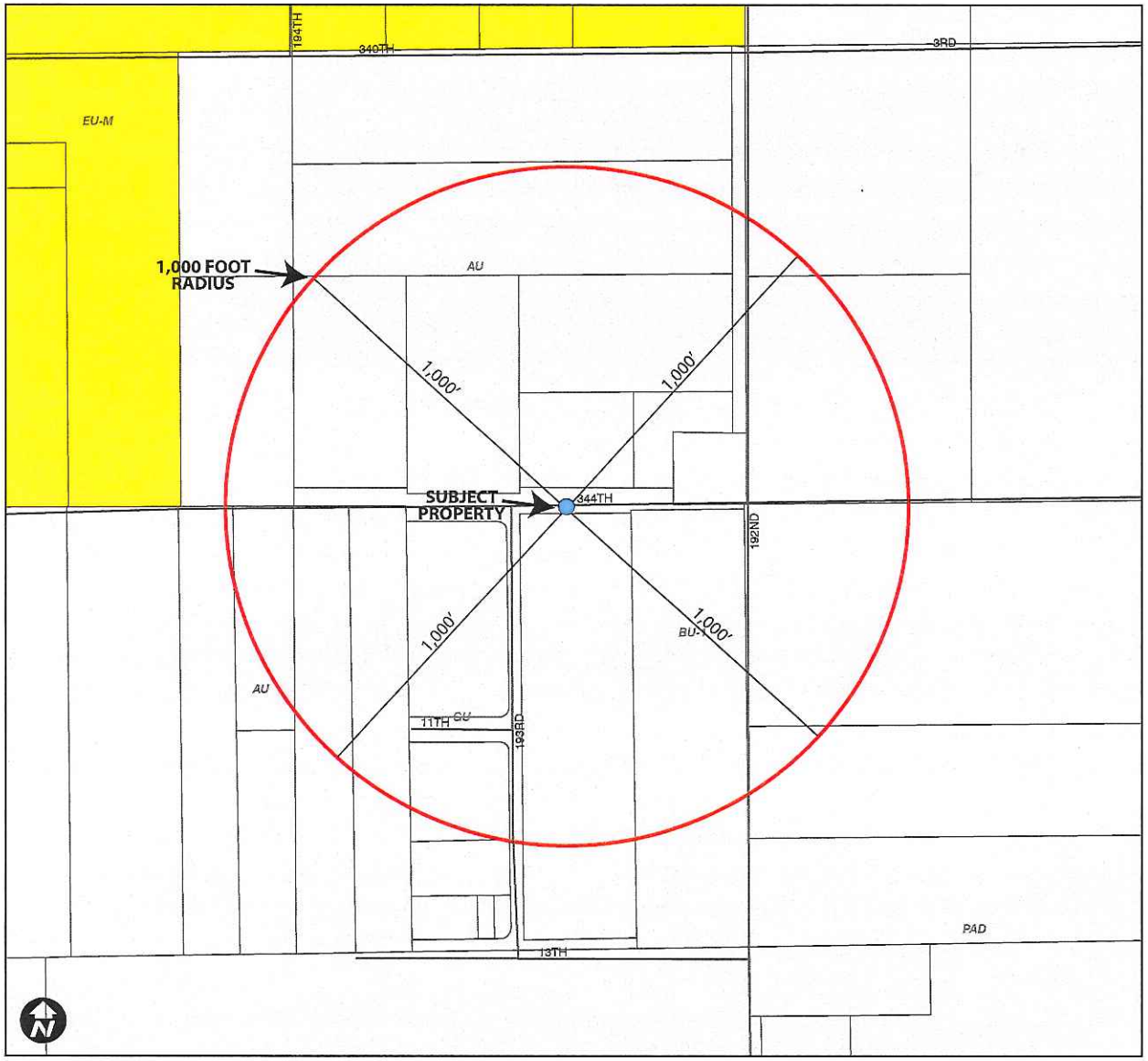
a. Scale of survey should be 1" to 300'.

b. Certification (signed and raised seal of licensed surveyor): The surveyor must certify all that apply with the following text:

"I_____certify that as of_____(date): there are no group homes within a 1,000 foot radius of the proposed group home in a non-urban center district; there are no group homes within a 1,000 feet radius of the proposed group home in the R category of an Urban Center or Urban Area District; and in the RM, MC, MM, MO, MCS, and MCI categories in an Urban Center or Urban Area District there are no group homes within 1,200 feet of the proposed group home."

6. **In case of dispute, the measurement scaled by the Director shall govern.**

Sample 1,000 Foot Radius Map for Group Homes



0 125 250 500 750 1,000 Feet

Folio No.:

Address:

Legal Description:

Date of Survey:

Purpose of Survey:

"The purpose of the survey is to locate all group home facilities within 1,000 feet of the proposed group home if in a non-Urban Center District;" or "The purpose of the survey is to locate all group home facilities within 1,000 feet of the proposed group home in an R category Urban Center District;" or "The purpose of the survey is to locate all group home facilities within 1,200 feet of the proposed group home in an RM, MC, MM, MO, MCS, and MCI category in an Urban Center District."

Methodology:

Explain the method used to locate and identify the above establishments / properties. Surveyors may use online links for assistance in searching for sites, however, it is the surveyor's responsibility to ensure that the survey includes all relevant sites, regardless of whether such sites are included in any of the State of Florida's websites.

Surveyor's Notes:

If applicable, a list of all sites found within the required radius of the proposed site. (Include name of the establishment, address, and prescribed distance from proposed group home.

Scale of survey should be 1" to 300'.

Certification **(Signed and raised seal of licensed surveyor.)**

"I _____ certify that as of _____ (date): there are no group homes within a 1,000 foot radius of the proposed group home in a non-urban center district; there are no group homes within a 1,000 feet radius of the proposed group home in the R category of an Urban Center or Urban Area District; and in the RM, MC, MM, MO, MCS, and MCI categories in an Urban Center or Urban Area District ,there are no group homes within 1,200 feet of the proposed group home."

In case of dispute, the measurement scaled by the Director shall govern.