

**INFILL HOUSING INITIATIVE PROGRAM GUIDELINES**

**EXHIBIT "J"**

Date: \_\_\_\_\_

(On Developer Letterhead)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Hold Harmless Affidavit**

Address: \_\_\_\_\_

Folio Number: \_\_\_\_\_

To Whom It May Concern:

Miami-Dade County (The County) and its employees, are not responsible for code violations, County liens and citations, and open permits, unless the County agrees to release County liens and citations in accordance with Infill Program Guidelines (Section XV). In addition, The County shall be held harmless for any construction defect found in the home after the sale.

\_\_\_\_\_  
Buyer Signature

\_\_\_\_\_  
Seller Signature

\_\_\_\_\_  
Buyer Name (Print Full Name)

\_\_\_\_\_  
Seller Name (Print Full Name)

\_\_\_\_\_  
Name of Developer

\_\_\_\_\_  
Notary Public (Print Name)

\_\_\_\_\_  
Notary Public (Print Name)

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_. He/She is personally known to me or has produced \_\_\_\_\_ as identification.

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_. He/She is personally known to me or has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
(Notary)

My Commission Expiration

\_\_\_\_\_  
(Notary)

My Commission Expiration

**Closing Process:** At closing, complete the Hold Harmless Affidavit on the Developer's letterhead. This Affidavit must be completed and executed by the Developer (Seller) and the Buyer (Qualified Household) at closing and returned to Attn: Infill Housing Initiative Program, Public Housing and Community Development (PHCD), 701 NW 1st Court, Miami, FL 33136.