

INITIAL INTAKE SHEET

STREET LIGHTS

111 NW 1st Street, Suite 1501
Miami, FL 33128
Phone 305-375-2702
Email: STDP@miamidade.gov

**Parks, Recreation and Open
Spaces Department
Special Assessment Districts Division**

TO:

DATE:

FROM:

DOCUMENTS NEEDED FOR: _____

Is this a **Workforce Housing** project as defined under Chapter 33
of the Miami-Dade County Code?
YES ____ NO ____

- (2) Copies of Tentative Plat, 24”x 36”
- AutoCad file of Tentative Plat (electronic)
- AutoCad file of Site Plan (electronic)
- Petition form
- Exhibit “A”
- Opinion of Title
- Corporate Resolution
- Managing Members (LLC) Affidavit (for non-Florida based entities)
- Joinder from bank (if applicable)
- Document acknowledging district creation
- Declaration of Covenant for Street Light District
- Legal Description (in Word format)
- Light Selection Form
- Municipal Resolution for the creation and transfer of the district to the city (for incorporated areas)
- Surveyor's Affidavit

Please ensure all documents listed above are included in your petition package and are filled out completely to avoid a resubmittal fee. If you have any questions, please email us at STDP@miamidade.gov.

**MIAMI-DADE COUNTY
PARKS, RECREATION AND OPEN SPACES DEPARTMENT
SPECIAL ASSESSMENT DISTRICTS DIVISION**

Document Preparation
Date _____

Departmental Acceptance Date
(Government Use Only) _____

PETITION FOR STREETLIGHTING SPECIAL TAXING DISTRICT

To the Board of County Commissioners of Miami-Dade County, Florida:

We, the undersigned property owner(s), do hereby petition Miami-Dade County, Florida, for the creation of the Special Taxing District(s) required by the respective plat(s) pursuant to Chapter 18 of the Code of Miami-Dade County, Florida, for any or all of the following: installation, operation and maintenance of Light Emitting Diode (LED) of an intensity of 5,000 up to 50,000 lumens, mounted on concrete, fiber glass or existing poles. The petitioned for district lies within that portion of the unincorporated area of Miami-Dade County more fully described on the attached Exhibit A.

Tentative Plat(s) Name(s) and Number _____

It is understood and agreed that the boundaries of this district and the type and level of services to be provided by this district will be reviewed by the appropriate County authorities. It is also understood that the streetlights to be provided shall be in accordance with minimum standards and requirements set forth by the Miami-Dade County Parks, Recreation and Open Spaces Department.

OWNER'S NAME & SIGNATURE	OWNER'S ADDRESS	LEGAL DESCRIPTION OF PROPERTY	TAX FOLIO NUMBER
		MORE FULLY	
		DESCRIBED ON	
		THE ATTACHED	
		"EXHIBIT A"	

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of () physical presence or () online notarization, this ____ day of _____, 202__, by _____ as _____ for _____.

() Personally Known or () Produced Identification
Type of Identification Produced: _____

Notary Public, State of Florida

(SEAL)

My Commission Expires: _____

**MIAMI-DADE COUNTY PARKS, RECREATION
AND OPEN SPACES DEPARTMENT
OPINION OF TITLE**

TO: MIAMI-DADE COUNTY, a political subdivision of the State of Florida.

With the understanding that this opinion of title is furnished to Miami-Dade County, Florida, as an inducement for creation of a proposed special taxing district covering the real property, hereinafter described, in compliance with Chapters 18 and 28 of the Code of Miami-Dade County, it is hereby certified that I have examined _____ (the "Title Evidence") [*Please write in one of the following: a complete Abstract of Title, or Title Insurance Policy or Title Commitment (identified by company name and policy or commitment number)*] covering the period from the beginning to the ____ day of _____ (Month), 20____, at the hour of _____, inclusive, of the following described property. [*If examining anything other than a complete Abstract of Title, please also include: I know of no reason that this Title Evidence is inaccurate or incomplete.*]

*Insert Legal Description Here;
Must match legal description provided for platting purposes*

I am of the opinion that on the last mentioned date, the fee simple title to the above described real property was vested in:

[NOTE: For Limited Liability Company, Limited Partnership, Joint Venture, Corporation, or other legal entity, indicate parties comprising the legal entity and identify who is authorized to execute on the entity's behalf.]

Subject to the following encumbrances, liens, and other exceptions (If "none", please indicate):

1. RECORDED MORTGAGES:

[NOTE: Where Mortgagee is a Limited Liability Company, Limited Partnership, Joint Venture, Corporation, or other legal entity, identify who is authorized to execute on the entity's behalf.]

2. RECORDED CONSTRUCTION LIENS, CONTRACT LIENS AND JUDGEMENTS:

3. GENERAL EXCEPTIONS:

4. SPECIAL EXCEPTIONS:

I HEREBY CERTIFY that I have reviewed all the aforementioned encumbrances and exceptions and that none of them hinder or affect the creation of the special taxing district or the recording or enforcement of the enabling ordinance or resolution, including the assessment of special assessments on the above-described property.

Therefore, it is my opinion that only the following party(ies) must join in the petition for the special taxing district for the above-described property in order to make the special taxing district and special assessments valid and binding on the above-described property:

Name	Interest	Special Exception Number

[Where Title Evidence other than a complete Abstract of Title is indicated above, insert the following:] The following is a description of the aforementioned Title Evidence and its continuations:

Number	Company Certifying	No. of Entries	Period Covered

I HEREBY CERTIFY that the legal description contained in this Opinion of Title coincides with, and is the same as, the legal description in the petition for the creation of the special taxing district.

I, the undersigned, further certify that I am an attorney-at-law duly admitted to practice in the State of Florida and a member in good standing of the Florida Bar.

Respectfully submitted this ____ day of _____, 20__.

Name
Florida Bar No. _____
Address

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this ___ day of ____, 20___,
by _____, who is personally known to me or has produced _____ as
identification.

- Took an oath
- did not take an oath

My Commission Expires:

Notary Public
Print Name

CERTIFIED CORPORATE RESOLUTION

The undersigned hereby being the _____ of _____ a corporation existing under the laws of the State of Florida, certifies that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said Corporation at a meeting held on the ____ day of _____, 20__ at _____.

Resolved by the Board of directors of this corporation that the Corporation consent and join in the filing with the Board of County Commissioners a petition for a Special Taxing district for the subdivision known as _____ pursuant to Chapter 18 of the Code of Miami- Dade County; and be it further.

RESOLVED that the _____ of the Corporation is authorized, directed and empowered on behalf of the Company to execute any and all applications, petitions and other documents pertaining to the Special Taxing District for the subdivision known as _____ pursuant to Chapter 18 of the Miami-Dade County Code.

The adoption of said resolutions was in all aspects legal; and that said resolutions are in full force and effect and have not been modified or rescinded.

Dated this ____ day of _____, 202__

WITNESSED BY:

By:

BY

**STATE OF FLORIDA
COUNTY OF MIAMI-DADE**

The foregoing instrument was acknowledged before me by means of () physical presence or () online notarization, this ____ day of _____, 20__, by _____ as _____ for _____.

Signature

Printed Name
Notary Public, State of Florida

() Personally Known or () Produced Identification
Type of Identification Produced: _____

**AFFIDAVIT OF MEMBERS, MANAGING MEMBERS, AND MANAGERS
OF NON- FLORIDA (FOREIGN) LIMITED LIABILITY COMPANY**

WE,

Full name

Title(s)

hereby swear or affirm that :

1. The foregoing persons or entities set forth above constitute and are all of the Members, Managing Members, and Managers, as those terms are defined in Section 608.402, Fla. Stat.(2014), as same may be amended from time to time, or the equivalent* thereof, of the Non-Florida (Foreign) Limited Liability Company known as *[INSERT NAME]*, LLC, as same may be amended from time to time, or the equivalent* thereof, currently filed with the Secretary of State of the State of Delaware;
2. There are no Members, Managing Members or Managers, or the equivalent* thereof, of the aforesaid Non-Florida (Foreign) Limited Liability Company other than the persons or entities set forth above.
3. There are no provisions in any Articles of Organization, or the equivalent* thereof, of the aforesaid Non-Florida (Foreign) Limited Liability Company or in any operating agreement, written or oral, or the equivalent* thereof, of the aforesaid Non-Florida (Foreign) Limited Liability Company, as those terms are defined in Section 608.402, Fla. Stat.(2014), as same may be amended from time to time, which prohibit, restrict or limit in

* The term “equivalent” shall mean for the purposes of this Affidavit, with respect to “persons” or “entities”, any person or entity which has or may have any one or more of the duties or powers or obligations or responsibilities or authorities, real or apparent, of a Member, Managing Member, or Manager, as those terms are defined in Section 608.402, Fla. Stat. (2014), as same may be amended from time to time. The term “equivalent” shall mean for the purposes of this Affidavit, with respect to instruments or documents or articles of organization or operating agreements or written agreements or oral agreements, any written agreement or oral agreement or instrument or document which has or may have any one or more of the functions or purposes of any instrument, document, operating agreement, written agreement or oral agreement described or mentioned in this Affidavit.

any way or in any manner the execution of the instruments or documents attached hereto and incorporated herein by reference hereto, to wit, **[LIST ALL OF THE AGREEMENTS/DEEDS/ETC. TO BE EXECUTED]** by any of the foregoing persons or entities set forth above for and on behalf of the aforesaid Non-Florida (Foreign) Limited Liability Company and to bind and obligate the aforesaid Non-Florida (Foreign) Limited Liability Company as set forth in the foregoing instrument or document.

4. All of the foregoing persons or entities set forth above are authorized by the aforesaid Non-Florida(Foreign) Limited Liability Company, to execute the instruments or documents attached hereto and incorporated herein by reference hereto, to wit, **[LIST ALL OF THE AGREEMENTS/DEEDS/ETC. TO BE EXECUTED]** for and on behalf of the aforesaid Non-Florida (Foreign) Limited Liability Company and to bind and obligate the aforesaid Non-Florida (Foreign) Limited Liability Company as set forth in the foregoing instrument or document.
5. All of the provisions of this Affidavit shall be construed in accordance with the laws of the State of Florida.

Signature of Member/Managing
Member/Manager

Title(s)

Sworn to and subscribed before me this ____ day of _____, ____ (year) by _____ (print name legibly), who is personally known to me or who has produced _____ (type of identification).

(Signature of Notary Public)

(Print, type or stamp name of notary public)

Signature of Member/Managing
Member/Manager

Title(s)

Sworn to and subscribed before me this ____ day of _____, ____ (year) by _____ (print name legibly), who is personally known to me or who has produced _____ (type of identification).

(Signature of Notary Public)

(Print, type or stamp name of notary public)

Signature of Member/Managing
Member/Manager

Title(s)

Sworn to and subscribed before me this ____ day of _____, ____ (year) by
____ (print name legibly), who is personally known to me or who
has produced _____ (type of identification).

(Signature of Notary Public)

(Print, type or stamp name of notary public)

Joinder Form

TO: MIAMI-DADE COUNTY

Gentlemen:

The undersigned, being buyer/ mortgagee of the following described property, in Miami-Dade County, Florida, to-wit:

(Insert Legal Description Here)

does hereby and herewith join with _____, a Florida _____ and others in the pending petition for creation of a Special Taxing District for _____ as described in petition dated _____, which includes, the above referred to parcel of land. Witnesses:

Buyer(s)/ Mortgagee

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ day of _____, 20____, by _____ as _____ for _____.

Signature

Printed Name
Notary Public, State of Florida

Personally Known or Produced Identification

Type of Identification Produced: _____

SPECIAL TAXING DISTRICT ACKNOWLEDGEMENT

Pursuant to section 18-20.2 (d) of the Code of Miami-Dade County (Code), any special taxing district petition submitted pursuant to section 18-22.1 of the Code, shall require the petitioning property owner(s) to sign the following statement prior to submitting the petition. Upon creation of the special taxing district, the County Mayor or Mayor's designee shall record the statement, together with the legal description of the property, in the public records of Miami-Dade County, Florida. The petitioning property owner(s) shall be required to prepay the costs of such recordation at the time the petition is filed.

Recording Costs to be submitted with document(s)

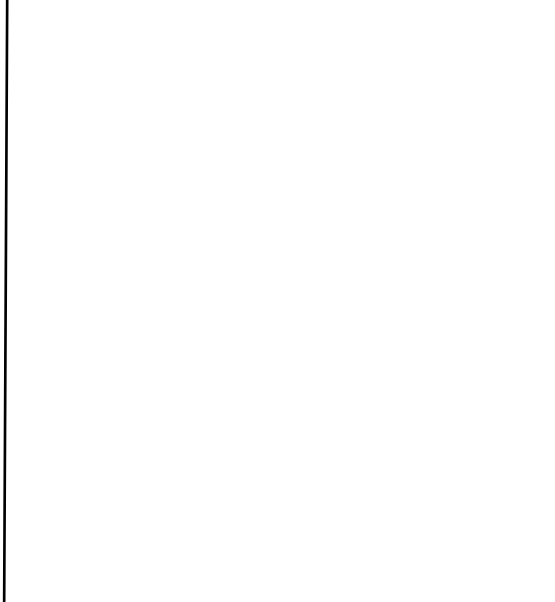
First page	\$10.00
Other pages	\$8.50 per page

SPECIAL TAXING DISTRICT ACKNOWLEDGMENT

Pursuant to section 18-20.2 (d) and section 18-22.1 of the Code of Miami-Dade County

KNOW ALL MEN BY THESE PRESENTS:

WHEREAS, the undersigned, _____, the
_____ of _____;
a Florida _____, being the owner of the following described
property, in Miami-Dade County, Florida, to wit:



Space above reserved for use of recording office

(Insert legal description of attach EXHIBIT "A")

(Insert folio)

This property is located within the _____ Special Taxing District created by Miami-Dade County for the purpose of providing local improvements and services in the nature of _____. The costs for providing such improvements and services shall be paid by special assessments levied against the properties within the district. Said special assessments may be collected at the same time and in the same manner as ad valorem taxes.

Signature of Property Owner(s)

Name and Position of Property Owner(s)

Name of Owner Entity (if applicable)

Notary Statement and Stamp:
STATE OF FLORIDA

SS.

COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this day, before me, an officer duly qualified to take acknowledgements, personally appeared _____ the _____ of _____ a Florida Corporation personally known to me, or who produced identification in the form of _____, and who executed the foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid, this _____ day of _____, 20____.

(SEAL)

Notary Public, State of Florida
My Commission Expires: _____

DECLARATION OF COVENANT

KNOWN ALL MEN BY THESE PRESENTS:

WHEREAS, the undersigned, _____, the
_____ of _____;
a Florida _____ is the owner of the following subdivision,
to wit: _____ as recorded in Plat Book _____
and Page _____ of the Public Records of Miami-Dade County, Florida and

WHEREAS, Miami-Dade County, Florida, required notice to purchasers of new residential property of the existence, or the proposed creation, of special taxing districts affecting their property,

Space above reserved for use of recording office

NOW, THEREFORE, in consideration of the approval of the aforesaid plat of _____ (plat name) by Miami-Dade County, Florida, the undersigned do(es) hereby declare and agree that upon the sale of said subdivision or of any lot or lots therein, the undersigned will incorporate in such conveyances the following covenant, to wit:

THE PROPERTY WHICH IS THE SUBJECT OF THIS TRANSACTION IS LOCATED WITHIN THE _____ SPECIAL TAXING DISTRICT PROPOSED FOR CREATION BY THE MIAMI-DADE BOARD OF COUNTY COMMISSIONERS FOR THE PURPOSE OF PROVIDING THE FOLLOWING LOCAL SERVICES: _____. THE COST FOR PROVIDING SUCH SERVICES SHALL BE PAID BY THE SPECIAL ASSESSMENT LEVIED AGAINST PROPERTIES WITHIN THE DISTRICT. SAID SPECIAL ASSESSMENTS MAY BE COLLECTED AT THE SAME TIME AND IN THE SAME MANNER AS AD VALOREM TAXES.

The undersigned hereby declare(s) that this said covenant shall constitute a covenant running with the land and shall be binding upon the undersigned, his successors, and assigns.

IN WITNESS WHEREOF, the undersigned _____ of _____, a Florida _____ has (have) executed these presents for the purpose of set forth, this _____ day of _____, A.D. 20____.

Signed: _____
Printed Name: _____
the _____ of _____

Notary Statement and Stamp:
STATE OF FLORIDA

SS.

COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this day, before me, an officer duly qualified to take acknowledgements, personally appeared _____ the _____ of _____ a Florida Corporation personally known to me, or who produced identification in the form of _____, and who executed the foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid, this _____ day of _____, 20____.

(SEAL)

Notary Public, State of Florida
My Commission Expires: _____

NOTICE TO SUBDIVISION OWNERS/DEVELOPERS/PLAT APPLICANTS

Available Streetlight and Pole Styles for Special Taxing Districts

The various streetlight and pole styles made available by the Florida Power and Light Company for installation in our special taxing districts are shown on the reverse side of this notice.

While the Parks, Recreation and Open Spaces Department, in an effort to provide lighting continuity, reserves the right to match light styles with those of adjoining taxing districts or collector roadways, we do wish, to the extent possible, to provide your development with the lighting style of your preference, and thus invite you to select the one that best suits your development and to advise us of such choice by completing the lower portion of this notice.

For additional information, please contact the Special Assessment Districts Division office at (305) 375-2702.

For the Special Assessment Districts Division

Name of Proposed Plat (s): _____

Preferred Light Fixture and Pole Style: _____

For the _____ Special Taxing District

Name/Signature of Authorized Representative of Development

Title

Date

FPL LED LIGHT & POLE OPTIONS

Roadway Lighting

Cobra Head Fixture

Mounted on a concrete pole or existing wood pole
30' mounting height, 120' - 150' between poles
76 Watt to 274Watt LED (Light-Emitting Diode)



Manufacturer: AEL



Manufacturer: Cree

Post-Top Lighting



Contemporary Post-Top Fixture

Mounted on a concrete pole

15' mounting height, 60' - 120' spacing between poles

72 Watt LED- (Light-Emitting Diode)



Traditional Post-Top Fixture

Mounted on a fiberglass pole

15' mounting height, 60' - 120' spacing between poles

73 Watt LED- (Light-Emitting Diode)