



# City of Hialeah Gardens

Planning & Zoning Department

Application for Plat

10001 N.W. 87th Avenue, Hialeah Gardens, FL 33016

Phone (305) 558-4114 Fax (305) 698-7236

**Type of Application:**

Waiver    Tentative    Final    Other \_\_\_\_\_

Municipality: HIALEAH GARDENS Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. Rge. \_\_\_\_\_ E

1. Name of Proposed Subdivision \_\_\_\_\_

2. Owner's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Fax ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Applicant's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Fax ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Surveyor's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Company \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Legal Description of Parent Tract Folio No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

In addition to the paper version, it is requested that lengthy metes and bounds descriptions be provided on disc in Microsoft Word.

5. Street boundaries \_\_\_\_\_

6. Present Zoning \_\_\_\_\_

7. Proposed use of Property Single Family Res. \_\_\_\_\_ Units, Duplex \_\_\_\_\_ Units, Apartments \_\_\_\_\_ Units  
Commercial/Warehouse \_\_\_\_\_ Sq. Ft., Business \_\_\_\_\_ Sq. Ft., Office \_\_\_\_\_ Sq. Ft.  
Restaurant \_\_\_\_\_ Sq. Ft. & No. of Seats \_\_\_\_\_, Other \_\_\_\_\_ Sq. Ft. & No. of Units \_\_\_\_\_

8. Minimum lot size \_\_\_\_\_ Maximum lot size \_\_\_\_\_ Average lot size \_\_\_\_\_

9. Required supporting information:

a. Proof of ownership

- b. 7 copies of the plat (Additional 7copies after TRC.)
- c. Plat Mylar (Required with final plat submittal, signed and sealed accordingly.)
- d. Opinion of the title (For all final plats.)
- e. Agreement for all improvements within the public right of way and the right of way deed recorded at Miami-Dade County Circuit Court. (For waiver of plats).
- f. Plat Committee Action Report. (For all final plat submittals and waiver of plat adoption, the plat committee action report from Miami-Dade County must submitted)
- g. Electronic file submission. In addition to hard copies, all standard set plans, plats, surveys must be submitted in PDF format as well as legal descriptions in Microsoft Word format.
- h. Fees:

**Tentative Plat**

Tentative Plat base fee.....	\$1,000.00
Resubmission of Tentative Plat w/ new owner/due to non-compliance .....	\$700.00
Request for extension of T-Plat prior to expiration.....	\$700.00
Request for extension of T-Plat after to expiration.....	\$1,700.00

**Final Plat**

Final Plat base fee.....	\$1,000.00
Survey Review for with compliance w/ Chapter 177.F.S. ....	\$450.00

**Waiver of Plat**

Waiver of Plat Application.....	\$1,000.00
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**Vacation/Dedication of R-O-W**

Vacation/Dedication of R-O-W Application.....	\$1,000.00
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**Please make check for the processing fee payable to: CITY OF HIALEAH GARDENS**

**i: Other:** List all plat restrictions, zoning conditions, or any other declaration restriction, condition, etc. that might affect this plat.

**NOTES: A copy of the application should be included with each package that is submitted. The reverse side of this sheet may be used for a statement of additional items you may wish considered. All copies should include the following information:**

**City of Hialeah Gardens – Plat approval (Waiver and Tentative Plats)**

\_\_\_\_\_  
**Yioset De La Cruz**  
 Mayor

\_\_\_\_\_  
**Mirtha González**  
 Chief Zoning Official

**For Department Use Only-Do Not Write Below**

Date received: \_\_\_\_\_ Check No. \_\_\_\_\_  
Date: T.R.C. \_\_\_\_\_ Date: Council \_\_\_\_\_ (1<sup>st</sup>. Reading) \_\_\_\_\_ (2<sup>nd</sup>. Reading)

**AFFIDAVIT**

I HEREBY CERTIFY that I am the owner of the parcel (s) described in Item 4 and that the information contained in this application is true and correct to the best of my knowledge and belief. Attached is a copy of the recorded deed showing my acquisition of this land. Also, I agree to furnish additional items as may be necessary such as abstract or opinion of title to determine accurate ownership information. Furthermore, I am aware that the use of the public water supply and/or public sewer system may be required for this development. If so required, I recognize that engineering drawings for the extension of these utilities must be approved by the appropriate utility entity and by D.E.R.M. prior to the approval of the final plat.

STATE OF FLORIDA)

SS: Signature of Owner: \_\_\_\_\_

COUNTY OF MIAMI-DADE)  
(Print name and title here): \_\_\_\_\_

BEFORE ME, personally appeared \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_  
A.D. (he/she) acknowledged to and before me that (he/she) executed the same for the purposed therein.  
Personally known \_\_\_\_\_ or produced \_\_\_\_\_ as identification and who did (not) take an  
oath.

WITNESS my hand and seal in the County and State last aforesaid this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_  
A.D.

Signature of Notary Public \_\_\_\_\_

(Print, type name here): \_\_\_\_\_

(NOTARY SEAL)

\_\_\_\_\_  
(Commission Expires)

\_\_\_\_\_  
(Commission Number)