



City of Hialeah Gardens

10001 N.W. 87th Avenue, Hialeah Gardens, FL 33016
Phone (305) 558-4114 Fax (305) 698-7236

REZONING APPLICATION

The attached application Must Be Completed (Printed in ink or typed) and submitted with all enclosures referred to therein, to the Planning and Zoning Department of the City of Hialeah Gardens, before advertisement may be made for a public hearing.

The applicant is reminded that the change requested in this application must be justified and the mere filing of the application or appearance at the public hearing does not assure approval of the application.

The following forms are included in this packet.

- Required enclosure list and fee schedule(2 pages)
- Application Form (2 pages).
- Radius Map & Petition/Owners List Affidavit (1 page)
- Disclosure of All Parties in Interest Form and Affidavit (2 pages)
- Sample Petition Form. Call Planning and Zoning Department (305)558-4114 to approve correct wording of the petition. A "P&Z Approval Stamp" is required.

ALL QUESTIONS MUST BE ANSWERED

**CITY OF HIALEAH GARDENS
REZONING**

REQUIRED ENCLOSURES AND FEES

- a. **18 copies** of a **Special Purpose Survey**, (An As-Built Survey, less than six months old, which includes, the square footage of the lot, square footage of pervious area, lowest finished floor elevation, and Flood Insurance Rate Map data). (At least two copies with Surveyor's embossed seal and signed).
- b. **18 sealed copies** of a **Radius Map** showing all properties within 1500 feet of the Radius of the subject property. Owner's name on each parcel. **(Statement must be included on Radius Map indicating it was prepared by certificate surveyor or mapper)** .

NOTE:

Both Survey and Radius Map shall be prepared by a Professional Surveyor or Mapper licensed pursuant to 472, Florida Statutes.

- c. **18 copies of site plan**, with building elevations, prepared by professional engineer, architect or landscape architect in accordance with Hialeah Gardens Land Development Regulations. (At least 2 copies with professional's embossed seal and signed).
- d. **Request/Owners List**, prepared as per sample. Includes verbiage on each sheet and lists properties with a 1500-foot radius of the subject property, exclusive of the petitioner, staying the request to be considered.

A "**P&Z Approval Stamp**" must be affixed on the petition by the Planning and Zoning Department prior to circulation.

The petition must reflect the legal descriptions, folio numbers and property addresses of all properties within a 1500-foot radius of subject property, complete with names and mailing addresses of property owners as reflected by the most recent tax records.

*** Condominiums ***

If the condominium board is developer-controlled, then all unit owners are to be included on the owner's list.

In both instances, the name of the association and its president, and the association's address where a notice is to be mailed, must be provided.

- e. **Affidavit** stating that the **Radius Map & Request/Owners List is complete and accurate**. Signed the individual or company who prepared said documentation.
- f. **Mailing Labels** with the names and mailing addresses of those owners in the radius. (Do not include duplicate names and addresses)
- g. **Disclosure of All Parties in Interest** form.
- h. **APPLICATION FEES:** Hearing fee of **\$3,500.00** plus cost of signs (\$80 per sign).

Any 100% service-connected disable veteran, upon proof of such disability, shall receive a 50% reduction in fees for application filed on the disabled veteran's homestead, providing the veteran has owned the homestead property according to the Public Records of Miami-Dade County, Florida, for a period of a least two years prior to the of this application.

Prior to the hearing, signs will need to be posted on the property. The sign(s) shall contain the day, date, time and location of the hearing. The sign(s) shall also include the applicant's name, the location of the property. The sign(s) shall be prepared by P&Z Department and placed in public view on each frontage of the property.

- i. **BE ADVISED THAT DUE TO THE FACT THAT ALL REQUESTS ARE UNIQUE, ADDITIONAL DOCUMENTATION MAY BE REQUIRED. YOU WILL BE NOTIFIED, IF ADDITIONAL DOCUMENTATION IS REQUIRED.**

APPLICATION INFORMATION (Lines 1 through 4)

The individual submitting this application is required to complete this section. If the applicant is a joint property owner, a trustee, or a corporation, notarized supporting documentation is required to show that the applicant is authorized to submit the application. **Any application missing said documentation is subject to be returned.**

PROPERTY INFORMATION (Lines 5 through 8)

- Line 5 The folio number as recorded in the Miami-Dade County tax rolls.
- Line 6 The address as listed in the Miami-Dade County tax rolls or the approximate location.
- Line 7 Legal description as stated in the survey of the property.
- Line 8 Existing Zoning Designation.

REQUESTED ZONING (Line 9)

- Line 9 Enter the desired Zoning

JUSTIFICATION FOR REQUEST (Line 10 and 10a)

- Line 10 State the reason for the request.
- Line 10a If applicable, state provisions to be made official right-of-way.

AFFIDAVIT (Lines 11 through 13)

- Line 11 The applicant(s) name is printed or typed and the applicant(s) Relationship to the property is to be indicated. Applications received without notarized documentation supporting the applicant's authorization to act on behalf of the legal over will be returned. It is the applicant's responsibility to ensure that all documentation is attached.
- Line 12 Signature of the applicant(s) whose name(s) appears on Line 12.
- Line 13 Jurat, to be completed by a Notary Public.

**CITY OF HIALEAH GARDENS
APPLICATION FOR REZONING**

**APPLICANT
INFORMATION**

(1) [] OWNER OF PROPERTY [] REPRESENTATIVE

(2) Name: _____

(3) Home Phone () _____ 3a) Work Phone () _____

(4) Mailing Address: _____

City: _____ State: _____ Zip: _____

**PROPERTY
INFORMATION**

(5) Folio Number: _____

(6) Address or
Approx. Location: _____

(7) Legal Description: _____

**ZONING
INFORMATION**

(8) Existing Zoning: _____

(9) Requested Zoning: _____

**JUSTIFICATION
FOR REQUEST**

(10) Special conditions or reasons justifying requested Zoning. _____

(10a) If applicable, what provisions will be made for official right-of-way: _____

**RADIUS MAP & PETITION / OWNERS LIST
AFFIDAVIT**

STATE OF FLORIDA

COUNTY OF _____

Re: Property Owners List Within 1500 feet of:

Address/Location: _____

Legal Description
and Folio (s): _____

I certify that the attached ownership list, maps and mailing labels provide a complete and accurate representation of the real estate property and property owners within 1500 feet of the subject listed above. This reflects the most recent Miami-Dade County Tax records.

(Signature)

(Printed Name)

(Company Name)

(Address)

Affix
Corporate
Seal

(Telephone)

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON THIS _____ DAY OF

_____, BY _____.

DID TAKE AN OATH [] OR DID NOT TAKE AN OATH []
PERSONALLY KNOWN [] OR PRODUCED IDENTIFICATION []

TYPE OF IDENTIFICATION PRODUCED: _____

SIGNATURE OF NOTARY PUBLIC

NAME OF NOTARY TYPED, PRINTED, OR STAMPED

MY COMMISSION EXPIRES

**DISCLOSURE OF ALL PARTIES IN INTEREST
FOR REZONING**

IF APPLICANT IS A CORPORATION OR PARTNESHIP, ALL OFFICERS AND OR PARTNERS SHALL DISCLOSE THEIR NAME AND ADDRESSES.

NAME(S) AND ADDRESS(ES) OF ALL LEGAL AND/OR EQUITABLE OWNERS, EVEN IF SAID PROPERTY IS HELD IN TRUST FOR SAME:

NAME(S) AND ADDRESS(ES) OF THOSE HAVING ANY INTEREST IN A CONTRACT FOR SALE OF SAID PROPERTY, INCLUDING REAL ESTAE BROKERS AND SALES PERSONS:

MORTGAGEE(S) OF PROPERTY:

ALL THOSE HAVING ANY INTEREST IN A CONTRACT FOR SALE, SHALL DISCLOSE WHETHER THEY ARE ACTING IN TRUST AND/OR FOR AN UNDISCLOSED PRINCIPAL AND, IF SO, SHALL DISCLOSE THE NAME(S) AND ADDRESS(ES) OF THE BENEFICIARY(IES) OF THE TRUST OR THE PRINCIPALS(S) AND THEIR INTEREST IN THE CONTRACT:

THE DISCLOSURE REQUIED MUST BE MADE AND OR UPDATED WITHIN A REASONABLE TIME, AS MAY BE NECESSARY, IN ORDER TO ENSURE THAT THE INFORMATION DISCLOSED IS ACCURATE AT THE TIME OF RILLING AND AT ALL TIMES THEREAFTER, SPECIFICALLY, AT DATES UPON WHICH ACTI NIS DISCUSSED AND/OR TAKEN UPON SUCH PROPERTY.

AFFIDAVIT

THIS IS TO CERTIFY THAT THE UNDERSIGNED (HAS) (HAVE) PREPARED THE FOREGOING DISCLOSURE OF ALL PARTIES IN INTEREST ON PROPERTY LEGALLY DESCRIBED AS:

FOLIO(S) #: _____

LOCATED ON/AT: _____

(I) (WE) FURTHER UNDERSTAND THAT ANY CHANGE(S) IN SAID DISCLOSURE SHALL BE UPDATED AND ACCURATE AT ALL TIMES, SPECIFICALLY A DATES UPON WHICH ACTION IS DISCUSSED AND/OR TAKEN ON SAID PROPERTY.

(I) (WE) FURTHER CERTIFY THAT TO THE BEST OF (MY) (OUR) KNOWLEDGE IT IS A COMPLETE DISCLOSURE.

SIGNATURE

Affix
Corporate
Seal

SIGNATURE

STATE OF _____

COUNTY OF _____

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGE BEFORE ME ON THIS _____ DAY OF

_____, _____ BY _____
(Owner/Representative)

DID TAKE AN OATH [] OR DID NOT TAKE AN OATH []

PERSONALLY KNOWN [] OR PRODUCED INDENTIFICATION []

TYPE OF IDENTIFIACATION PRODUCED _____

MY COMMISSION EXPIRES

SIGNATURE OF NOTARY PUBLIC

NAME OF NOTARY TYPED, PRINTED, OR STAMPED

PETITION TO PROPERTY OWNER

A Public Hearing will be held before the Planning & Zoning Board and the City Council concerning the following legally described property:

APPLICANT: _____

Legal Description: _____

Approximate Location: _____

REZONING

Rezoning from _____ to _____ according to section _____ of the Land Development Regulations from the City of Hialeah Gardens.

PUBLIC HEARING

Planning and Zoning Board meeting will be heard on _____ at 7:30pm in the Council Chambers, Hialeah Gardens, Florida

City Council meeting first reading will be heard on _____ at 7:30 pm in the Council Chambers, Hialeah Gardens, Florida

City Council meeting second reading will be heard on _____ at 7:30 pm in the Council Chambers, Hialeah Gardens, Florida

ADJOURNMENT “Any person desiring to appeal any decision made by the Board or the Council with respect to any matter considered at this hearing will need a record of the proceedings, and it will be their responsibility to insure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based”

“Any person requiring the presence of a translator to aid them in the proceedings should obtain the services of a translator since the City does not provide same. You do not need to obtain the services of a professional translator, but may bring any individual who is able to translate from your native tongue into English and vice versa.”