



City of Hialeah Gardens

Application for Public Hearing / Zoning Department

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

Phone (305) 558-3862, (305) 558-4114 Fax (305) 698-7236

Date of Application: _____

This application must be completed and returned with all required information to the Zoning Department of the City of Hialeah Gardens before public hearing notice can be advertised by the City Clerk. A Public Hearing will be held before the Planning and Zoning Board, which will then present written recommendations to the City Council. The City Council has the power to authorize changes through written ordinance or resolution. Ordinances require two separate readings. The Applicant must justify any special requests for special exception uses or variances. The mere filing of the application and appearance before the Planning and Zoning Board and the Council does not assure approval of the application.

Application Fee: \$1000.00 (Non-Refundable)

Name of Applicant: _____

Mailing Address: _____

Telephone Number: _____ Email: _____ Fax: _____

Present Zoning Classification of Property: _____

Legal Description of Property covered by this application:

(Size of Area must be on application or attached hereto)

Reason of Request: (Please Specify)

Special conditions or reasons justifying change requested:

The Following Must Be Included:

_____A. Radius map of 1500 feet radius

_____B. A Certified list of names and mailing addresses of property owner, as reflected by the property records of Dade County, Florida based on radius map, in which the land use is zoned EU=Estates Residential, LDR=Low Density Single Family Residential, MOR=Moderate Density Single Family Residential, MER=Medium Density Residential, HDR=High Density Residential, BU=Business, CM=Commercial, NR=Neighborhood Retail, and IN=Industrial.

_____C. The Applicant shall provide stamped envelopes addressed to all property owners stamped for the purpose of regular mailing within 15 days prior to the time such request shall be considered. All information required for regular mail process be filled out. In the event that additional mailings are required for any reason, the applicant shall pay to the City an additional sum of one hundred dollars (\$100) and provide stamped addressed envelopes to all property owners.

_____D. A written petition setting forth the desired change or modification.

_____E. The applicant shall pay all costs of posting the property and preparing notice of the property as follows: A check, cash, or money order of \$1000.00 plus \$80.00 signs fee (Payable to the "City of Hialeah Gardens")

I, _____ being first duly sworn, depose and say that:

_____I am the owner of the property

_____I am the representative of the owner of the property (need power of attorney)

_____I am the lessee to the property (need power of attorney)

_____I am the representative of the lessee of the property (need power of attorney)

All of the above require proof of ownership and warranty deed, with the power of attorney form.

Signature

Date

Sworn and subscribed before me this _____Day of _____, 20____

My Commission expires: