

APPLICATION FOR MITIGATION

Business Name: _____

Violator: _____

Owner: _____

Property Address: _____

Special Master Case: _____

Violation Number: _____

Date of Violation: _____

Date of Compliance: _____

Explain Violation:

Explain Basis for Mitigation (Refer to code section 30-76)

(Attached additional sheets if required.)

I swear under penalty of perjury that the information I have provided is true to the best of my knowledge and belief.

VIOLATOR OR AUTHORIZED REPRESENTATIVE:

Signature Date

Printed Name

Title

If Building Cases, please send this form to: CynthiaNeves@miamibeachfl.gov
If Code and Fire Cases, please send this form to: FernandaSilva@miamibeachfl.gov
All other Cases, please send this form to: IsabelSatchell@miamibeachfl.gov