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 Mitig | gation (Refer to code section 30-76) | |
| (A((a, 1, a, 1, a, 1, 1))) | | |
| (Attached additional she | | |
| belief. | perjury that the information I have provide | led is true to the best of my knowledge and |
| VIOLATOR OR AUTHO | RIZED REPRESENTATIVE: | |
| Signature | Date | _ |
| Printed Name | | - |
| Title | | _ |

Please send form to: Specialmagistrate@miamibeachfl.gov