



# City of Miami Springs

201 Westward Drive Miami Springs, FL 33166

Phone: (305) 805-5034 Fax: (305) 805-5036 Website: [www.miamisprings-fl.gov](http://www.miamisprings-fl.gov)

## BASIC SUBMITTAL APPLICATION CHECKLIST

### Mandatory Submittals – For all applications

- Complete Application Form, including all required forms and affidavits, signed by property owner or owner's representative. Forms may be downloaded from the City website or requested by emailing [planning@miamisprings-fl.gov](mailto:planning@miamisprings-fl.gov).
- Letter of Authorization from property owner, if different from Applicant.
- Letter of Intent signed by owner or owner's representative, which may include a narrative describing the project(s), whether the impact of the proposed development is favorable, adverse, or neutral on the economy, public services, environment, and housing supply of the City, and the relationship of the proposed project to surrounding, existing, and proposed Future Land Uses, and to existing zoning, and the City's Comprehensive Plan. This narrative may be provided as a document separate from the letter.  
If variances, special exceptions, appeals, and/or conditional uses are being requested, the extent of these from the requirements shall be noted in the narrative.  
If site plans are being requested, please refer to [\*Site Plan Application Guidelines Form\*](#).
- Recent Property Survey prepared by a registered land surveyor that is less than one (1) year old accompanied by a written statement from the property owner that the survey accurately depicts the structures, landscaping, incidental furnishings or equipment and topographical features currently on the subject property according to [Sec. 150-027](#).
- Engineering, Infrastructure, and Public Works requirements, if applicable.
- Application Fee and cost recovery deposit as shown in the [Official Fee Schedule](#) on the City's website.

**Applications are deemed incomplete until all mandatory submittals have been received by the City of Miami Springs Planning and Zoning Department**



## DEVELOPMENT APPLICATION

### Instructions

Please print or type all the fields, except those for "Office Use Only." This application must be filled out accurately and completely; if an item is not applicable to your development, simply write "N/A".

Office Use Only	
Application No.	Date
Escrow No.	

### Property Owner – acknowledgement and contact information

Under penalties of perjury, I declare that I have read the foregoing application and all attachments to the application and that the facts stated in it are true to the best of my knowledge and belief.

Name	Signature
Email	Telephone No.
Address	

### Application Type – Check all that apply

Requested Process(es)	
Meeting <input type="checkbox"/> Pre-application <input type="checkbox"/> Development review	Amendment(s) <input type="checkbox"/> Comprehensive Plan <input type="checkbox"/> Code <input type="checkbox"/> FLU Map <input type="checkbox"/> Zoning Map
Signs	
Platting <input type="checkbox"/> Tentative Plat <input type="checkbox"/> Final	Site Plan review / Large-Scale Development <input type="checkbox"/> Project type _____ <input type="checkbox"/> District _____
Variance / Special Exception Appeal / Conditional Use <input type="checkbox"/> _____ <input type="checkbox"/> _____	



**Project Description**

<b>Name</b>				
<b>Address</b>				
<b>Description</b>				
<b>Folio Number(s)</b>				
<b>Site Area</b>	Sq. Ft.		Acres	
<b>Existing Use</b>	Existing		Proposed	
<b>Residential Use</b>	Sq. Ft.		# units	
<b>Nonresidential Use (Sq. Ft.)</b>	Office		Retail	
	Restaurant		Other	

**Team Members, if applicable** – contact information

<b>Agent / Planner / Architect / Landscape Architect / Engineer / Land Use Attorney / Surveyor</b>	
Name	Company
Telephone No.	Email
<b>Agent / Planner / Architect / Landscape Architect / Engineer / Land Use Attorney / Surveyor</b>	
Name	Company
Telephone No.	Email
<b>Agent / Planner / Architect / Landscape Architect / Engineer / Land Use Attorney / Surveyor</b>	
Name	Company
Telephone No.	Email

Check here if additional team members are involved. Please attach contact information for the remaining team members as a separate sheet.



### AGENT AUTHORIZATION FORM

<b>Development Address</b>	
<b>Folio Number(s)</b>	
<b>Property Owner</b>	

The undersigned, registered property owner(s) of the subject site, do hereby authorize

\_\_\_\_\_, of \_\_\_\_\_  
Agent Name of Company / Firm

to act on my behalf and take all actions necessary for the processing, issuance, and acceptance of this application and all standard and special conditions associated.

<b>Agent Address</b>	
<b>Telephone No.</b>	
<b>Mobile</b>	
<b>Email</b>	

We hereby certify the above information submitted in this application is true and accurate to the best of our knowledge.

\_\_\_\_\_  
Owner signature

\_\_\_\_\_  
Agent signature

**THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED** before me, by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, the owner, who is  personally known or  produced the following identification \_\_\_\_\_ and by \_\_\_\_\_, if multiple, who is  personally known or  has produced the following identification \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signature

\_\_\_\_\_  
Notary Public – Printed Name

Stamp



**APPLICANT'S AFFIDAVIT FORM**

The Undersigned, first being duly sworn depose that all answers to the questions in this application, and all supplementary documents made a part of the application are honest and true to the best of my(our) knowledge and belief. I(We) understand this application must be complete and accurate before the application can be submitted and the hearing advertised.

**OWNER OR TENANT AFFIDAVIT**

I(We), \_\_\_\_\_, being first duly sworn, depose and say that I am (We are) the  Owner  Tenant of the property described, and which is the subject matter of the proposed project and any related public hearing.

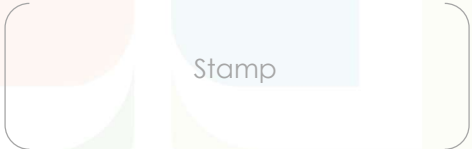
\_\_\_\_\_  
Owner/Tenant signature

\_\_\_\_\_  
Owner/Tenant signature

**THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED** before me, by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, the owner, who is  personally known or  produced the following identification \_\_\_\_\_ and by \_\_\_\_\_, if multiple, who is  personally known or  has produced the following identification \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signature

\_\_\_\_\_  
Notary Public – Printed Name





**CORPORATION, TRUSTEE, PARTNERSHIP, LIMITED PARTNERSHIP AFFIDAVIT**

I(We), \_\_\_\_\_, being first duly sworn, depose and say that I am (We are) the  President  Vice-President  Secretary  Asst. Secretary of the aforesaid  Corporation  Trustee  Partnership  Limited Partnership, and as such, have been authorized by the corporation to file this application for public hearing; and that said corporation is the  Owner  Tenant of the property described herein and which is the subject matter of the proposed hearing.

**NOTE:** where the principal officers or stockholders consists of another Corporation(s), Trustee(s), Partnership(s), or similar entities, further disclosure shall be required to identify of the natural person(s) having the ultimate ownership interest in said entity.

\_\_\_\_\_  
Name of Entity ( Corporate Seal )

By \_\_\_\_\_ %  
By \_\_\_\_\_ %  
By \_\_\_\_\_ %  
By \_\_\_\_\_ %

\_\_\_\_\_  
Signature

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\_\_\_\_\_      \_\_\_\_\_      ( Stamp )

Notary Public - Signature      Notary Public – Printed Name





**ATTORNEY AFFIDAVIT**

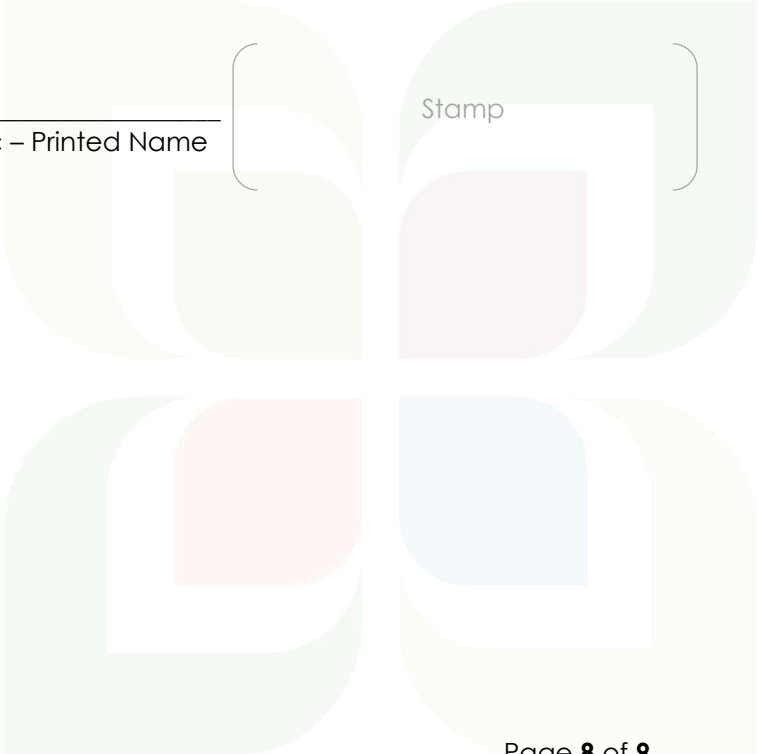
I, \_\_\_\_\_, being first duly sworn, depose and say that I am a State of Florida Attorney at Law, and I am the Attorney for the  Owner  Tenant of the property described, and which is the subject matter of the proposed hearing.

\_\_\_\_\_  
Signature

**THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED** before me, by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, the owner, who is  personally known or  produced the following identification \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signature

\_\_\_\_\_  
Notary Public – Printed Name







### COST RECOVERY AFFIDAVIT

I hereby acknowledge and consent to the payment of all applicable fees involved as part of this application process. These fees include but are not limited to application fees, postage, advertising. Attorney fees and any outside contractors, agents, or consultant regardless of the outcome of the public hearing.

Date \_\_\_\_\_

Full name \_\_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_

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

Telephone \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_  
Signature

**THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED** before me, by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, the owner, who is  personally known or  produced the following identification \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signature

\_\_\_\_\_  
Notary Public – Printed Name

