



City of Hialeah
SPECIAL USE PERMIT (SUP)
(Packet)

The attached application **must be completed** (Printed in ink or typed) and submitted with all enclosures referred to therein, to the Planning Division of the Hialeah Planning and Development Department, 2nd floor, City Hall, before advertisement may be arranged for a public hearing.

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

All Questions Must Be Answered

The following forms are included in this packet.

1. Required enclosures List and Fee Schedule
2. Instructions Sheet
3. Application Form (2 Pages)
4. Disclosures of All Parties in Interest Form.
5. Sample Petition Form and Mailing Label List. (Call the Planning Division (305) 883-8075 to ensure correct wording of the petition.)
6. Radius Map and Petition/Owners List Affidavit.
7. Declaration of Restrictive Covenants Forms.
 - Corporate Entity
 - Sole Proprietor or Partnership

Please Note

Letters of Authorization, Power of Attorney, etc.

MUST BE NOTARIZED

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- a. **25 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 permeable area, lowest finished floor elevation, and Flood Insurance Rate Map data). (At least two copies with Surveyor's embossed seal).
- b. **25 sealed copies** of a **Radius Map** showing all properties within 500 feet of the perimeter of the subject property. Map to be at a scale of 150 feet to one inch or larger. Owner's name on each parcel. **(Statement must be included on Radius Map indicating it was prepared by a certified surveyor or mapper).**

NOTE:

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

- c. **2 copies of Base Maps** (Radius Map prior to insertion of ownership on parcels) No larger than 8 ½ x 14" (legal size)
- d. **25 copies of Site Plans**, with building elevations, prepared by an engineer, architect, or landscape architect in accordance with section 32-7 (15) (6) (a) of the Hialeah Code of Ordinances. (At least 3 copies with professional's embossed seal).
- e. **Request/Owners List**, prepared as per sample. Includes verbiage on each sheet and lists properties within a 500-foot radius of the subject property, exclusive of the petitioner, stating the request to be considered.

The petition must reflect the legal descriptions, folio numbers and property addresses of all properties within a 500-foot radius of subject property, complete with names and mailing addresses of all property owners as reflected by the most recent tax records. This form must be printed in a size equal to or greater than 12 point font.

Condominiums

- If the condominium board is developer-controlled, then all unit owners are to be included on the owners list.
- If the condominium board is association-controlled, then only owners whose units lie on or within the 500-foot radius are to be included on the owners' 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.

- f. **Affidavit** stating that the **Radius Map & Request/Owners List is complete and accurate**. Signed by the individual or company who prepared said documentation.

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- g. **Mailing Labels** with the name and mailing address of those owners in the radius. (Do not include duplicate names and addresses).
- h. **Disclosure of All Parties in Interest** form.
- i. **Declaration of Restrictive Covenants** forms. There are two types of forms in this packet. Submit the “Corporate Entity” form if the applicant is a registered corporation. If the applicant is not incorporated, submit the other form.
- j. **Application Fees:** Hearing fee of **[\$[SEE FEE SCHEDULE]**. Triple fee shall apply if a building addition or alteration has been commenced without a building permit and/or prior to the approval of the applied for special use permit, if such permit is necessary in order to legally allow said building addition or alteration.

Any 100% service-connected disabled veterans, upon proof of such disability, shall receive a 50% reduction in fees for an 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 at least two years prior to the date of this application.

Prior to the hearing, city-supplied signs will need to be posted on the property. The sign(s) shall contain the day, date, time, and location of the property, and the request. The sign(s) shall also include the applicant’s name the location of the property, and the request. The sign(s) shall be placed in public view on each frontage of the property with a minimum of one (1) sign per one hundred sixty five (165) feet of the frontage. These signs shall be placed a minimum of one hundred sixty five (165) feet apart. The number of signs required is determined by the Planning Division. The cost of such signs and/or signs is paid for the applicant. Each sign cost \$26.00

- k. **Be advised that at the end of a special use permit, if additional living or a square footage are granted all applicable impact fees (Parks and Recreation, Roads, Schools, etc) shall be paid, based on per unit or square footage on constructed area.**
- l. **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.**

City of Hialeah
Application for Special Use Permit (SUP) Hearing
Instructions

Be advised of the following:

- a) The Special Use Permit (SUP) will follow the property, regardless of ownership, or would be limited to specific number of years and the condition of use.
- b) The specific use information and any limitations or agreements shall be listed in the application and shall be made part of the ordinance.
- c) Any change of the special use listed on the application will be a violation of this section of the code and cause revocation of the occupational license and the repeal and rescission of the ordinance granting the conditional use (without the benefit of the special use) in place prior to the SUP request.

Applicant Information (Lines 1 through 5)

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

Property Information (Lines 6 through 9)

- Line 6 The folio number, as recorded in the Miami-Dade tax rolls.
- Line 7 The address, as listed in the Miami-Dade tax rolls or the approximate location.
- Line 8 Legal description as stated in the survey of the property
- Line 9 Existing Zoning Designation (Office Use Only)

Requested Adjustments (Line 10 through 11)

- Line 10 Enter the desired special use.
- Line 11 If applicable, specify any limitations to request.

Justification for Request (Line 12 through 13)

- Line 12 State the reason for the request.
- Line 13 If applicable, state provisions to be made for official right-of-way.

Affidavit (Lines 14 through 16)

- Line 14 The applicant(s) name(s) is/are 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 owner to be returned. It is the applicant's responsibility to ensure that all documentation is attached.**
- Line 15 Signature of the applicant(s) whose name(s) appears on Line 14.
- Line 16 Jurat, to be completed by a Notary Public

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**Application
Information**

- 1) Owner of Property Representative
- 2) Name: _____
- 3) Home Phone: () _____ **3a)** Work Phone: () _____
- 4) E-mail Address: _____
- 5) Mailing Address: _____
City: _____ State: _____ Zip: _____

**Property
Information**

- 6) Folio Number: _____
- 7) Address of Location: _____
- 8) Legal Description: _____

- 9) Existing Zoning (Office Use): _____

**Requested
Conditional
Use**

- 10) Special Use desired in addition to present use:

- 11) Special limitations or agreements: _____

**Justification
for
Request**

- 12) Special conditions or reasons justifying requested Special Use:

- 13) If applicable, what provisions will be made for official right-of-way:

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State of Florida

County of _____

(I)/ (We) acknowledge that any corrections to submitted materials and/or supplemental requirements, if any, must be submitted before a hearing can be advertised.

14) (I)/ (We), _____ saw that

(I am)/ (We are) the

Owner (s) of the property

Representative of the owner of the property

And (I)/ (We) affirm that all answers are true and accurate to the best of our knowledge.

15) _____
Applicant(s) Signature

Applicant(s) Signature

Applicant(s) Signature

Applicant(s) Signature

16) The foregoing instrument was acknowledged before me on this ____ day of _____,
20____, by _____.
(Applicant)

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

Type of Application: _____

Application Types: (Platting, Rezoning, Variance, Special Use Permit, Conditional Use Permit, Final Decisions, Land Use Map Amendment).

If Applicant is a Corporation or Partnership 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 estate brokers and sale persons:

Mortgagee(s) of Property: _____

All those having an interest in a contract for sale, shall disclose whether they are acting 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 principal(s) and their interest in the contract:

THE DISCLOSURE 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 FILING AND AT ALL TIMES THEREAFTER SPECIFICALLY, AT DATES UPON WHICH ACTION IS 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:

Located on/at:

(I)/ (We) further understand that any change(s) in said disclosure shall be updated and accurate at all times, specifically at dates upon which action is disclosed and/or taken on said property.

(I)/ (We) further certify that to the rest of (my)/ (our) knowledge it is a complete disclosure.

Signature

Signature

State of Florida

County of _____

The foregoing instrument was acknowledged before me on this ____day of _____, 20____, by _____.

(Owner /Representative)

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

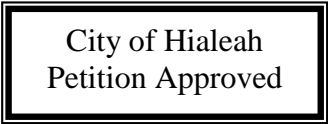
Type of Identification Produced: _____

My Commission Expires

Signature of Notary Public

Name of Notary Typed, Printed, or Stamped

Request/Owners List



Subject Property: 501 Palm Avenue, Hialeah, Florida.
 Zoned: GUD (Governmental Use District)
 The following are property owners within a 500-foot radius of the following legally described property:
 Legal Description: Lots 1 through 24, Block 1, Town of Hialeah, according to the plat thereof, as recorded in Plat Book 5, Page 77, of the public records of Miami-Dade County, FL.
 Request: Conditional Use Permit (CUP) to allow a funeral home.

	Folio # and Legal Descriptions <u>Town of Hialeah, PB 5/77</u>	Owners
S	Lot 1, Block 2 04-3118-001-0200 P.A. 600 Palm Ave	City of Hialeah P.O. Box 40 Hialeah, Fl 33011
A	Lot 2, Block 2 04-3118-001-0300	Planning and Zoning 610 Palm Ave Hialeah, Florida 33010
M	<u>Bradley Manor PB 10/64</u> Tract A	Building Department 500 Palm Ave Hialeah, Fl 33010
P	<u>1st ADDN Town of Hialeah PB 34/26</u>	
L	Lots 1-4, Block 4 04-3118-045-0500 P.A., 800 E 1 Ave	John Die & w/ Jane 100 Circle Drive Hialeah, Fl 33166
E	Lots 5, Block 4 04-3118-045-0600	Jane Smith 801 SW 2 Ave Hialeah, Fl 33010
	Lot 1-10, Block 5 04-3118-045-1000	Joe and Jones & W/Cathy 1015 SE 9 AVE Hialeah, Fl 33010

**Radius Map and Petition/Owners List
Affidavit**

State of Florida

County of _____

Re: Property Owners List within 500 feet of:

Address/Location: _____

Legal Description: _____

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 500 feet of the subject property listed above. This reflects the most recent Miami-Dade County Tax records.

(Signature)

(Printed Name)

(Company Name)

Address

Affix
Corporate
Seal

(Phone Number)

The foregoing instrument was acknowledged before me on this _____ day of _____,
20____, 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

Prepared by: City of Hialeah
Planning and Zoning Division
501 Palm Avenue, Second Floor
Hialeah, Florida 33010

DECLARATIONS OF RESTRICTIONS
(Corporate)

This Declaration of Restrictions executed this _____ day of _____, 20____, by _____ (“Owner(s”).

WITNESSETH:

WHEREAS, the undersigned, _____, a _____ corporation is the fee simple owner of the following described property located in the City of Hialeah, Florida: _____

Property address: _____

NOW, THEREFORE, for good and valuable consideration, the undersigned owner(s) hereby covenant(s) and agree(s) as follows:

1. The use of the property shall be limited as follows:

2. The covenant is intended and shall continue a restrictive covenant concerning the use, enjoyment, and title to the above-described property and shall constitute a covenant running with the land and may be recorded in the Public Records of Miami-Dade County, Florida. This covenant shall remain in full force and effect and shall be binding upon the undersigned, its/their heirs, successors and assigns until such time as the same modified, amended or released and may only be modified, amended or released by a written instrument executed by the then owner having fee simple title to the property affected or to be affected by such modification, amendment, or release; provided, however, the same is also approved by the City Council and the Mayor of the City of Hialeah, or its successors, by resolution, upon advertised notice, or by the ordinance if the covenant is adopted by ordinance or as otherwise provided in the Hialeah Charter.

3. The use of the property shall be in compliance with all ordinances, regulations, codes and charter of the City of Hialeah and applicable state and federal law and laws and regulations of Miami-Dade County, Florida.

IN WITNESS WHEREOF, We have hereunto set our hands and seals at _____
(Location)

this _____ day of _____ 20_____.

Signed, sealed, and delivered in the presence of:

ATTEST: _____ Name of Corporation: _____
Corporate Secretary

Typed/Printed Name

By: _____
President

Typed/Printed Name

Witness
Typed/Printed name _____

Corporate Seal

Witness
Typed/Printed Name _____

STATE OF FLORIDA
COUNTY OF MIAMI DADE

The foregoing instrument was acknowledged before me on this ____ day of _____ 20__ by
_____, as President, and _____, as Secretary, of
(Name of Officer or Agent) (Name of Secretary)

_____, a _____ corporation, on behalf of the corporation.
(Name of Corporation) (State of Incorporation)

They are personally known to me or have produced the following _____, as
identification and did (did not) take an oath and attest to the truth and accuracy of the representations
contained herein.

Signature of Notary Public

Name of Notary typed, printed, or stamped
Commission Number:

Prepared by and return to:
City of Hialeah
Planning and Zoning Division
501 Palm Avenue, Second Floor
Hialeah, Florida 33010

DECLARATIONS OF RESTRICTIONS
(Individual)

This Declaration of Restrictions executed this _____ day of _____, 20____, by _____ (“Owner(s”).

WITNESSETH:

WHEREAS, the undersigned, _____,
is/are the fee simple owner(s) of the following described property located in the City of Hialeah,
Florida:

Property address: _____

NOW, THEREFORE, for good and valuable consideration, the undersigned owner(s) hereby covenant(s) and agree(s) as follows:

1. The use of the property shall be limited as follows:

2. The covenant is intended and shall continue a restrictive covenant concerning the use, enjoyment, and title to the above-described property and shall constitute a covenant running with the land and may be recorded in the Public Records of Miami-Dade County, Florida. This covenant shall remain in full force and effect and shall be binding upon the undersigned, its (their) heirs, successors and assigns until such time as the same modified, amended or released and may only be modified, amended or released by a written instrument executed by the then owner having fee simple title to the property affected or to be affected by such modification, amendment, or release; provided, however, the same is also approved by the City Council and the Mayor of the City of Hialeah, or its successors, by resolution, upon advertised notice, or by the ordinance if the covenant is adopted by ordinance or as otherwise provided in the Hialeah Charter.

3. The use of the property shall be compliance with all ordinances, regulations, codes and charter of the City of Hialeah and applicable state and federal law and laws and regulations of Miami-Dade County, Florida.

IN WITNESS WHEREOF, I/ We have hereunto set our hands and seals at _____
(Location)

this _____ day of _____ 20_____.

Signed, sealed, and delivered in
The presence of:

Witness 1 (2 witnesses required)
Typed/Printed Name_____

Owner
Typed/Printed Name_____

Witness 2
Typed/Printed Name_____

Witness 1 (2 witnesses required)
Typed/Printed Name_____

Co-Owner
Typed/Printed Name_____

Witness 2
Typed/Printed Name_____

STATE OF FLORIDA
COUNTY OF MIAMI DADE

I HEREBY CERTIFY that on this _____ day of _____, 20_____, before me, an officer
duly authorized in the State of Florida and in the County of Miami Dade, to take acknowledgements,
personally appeared _____ and _____, to me known to be the
person(s) described herein and who executed the foregoing instrument, and he/she they acknowledge
before me, under oath, that he/she/they executed same.

Witness my hand and official seal this _____ day of _____, 20_____.

Notary Public, State of Florida

[] Personally known to me, or
[] Produced identification:

Identification Produced

Name of Notary typed, printed, or stamped
Commission Number:

[] DID take an oath
[] DID NOT take an oath

CONCURRENCY AFFIDAVIT

I/We _____ hereby acknowledge that although my/our _____ application for the property at _____, Hialeah, Florida, can proceed, I/We must meet concurrency management requirements as to satisfy traffic, water, sewer, solid waste, parks and recreation capacities.

1. Prior to the issuance of a building permit:
 - A. If I/We must obtain written approval from the Miami-Dade County Department of Environmental Resources Management (DERM) reserving the required gallons for additional sewer connections or demands on capacity generated by my/our application; or
 - B. If a septic tank or other alternate sewage collection or disposal method is authorized by DERM, then I/We must also obtain approval from the City of Hialeah Water and Sewer Department.
2. When condition 1A. applies, then I/We must execute and record with the Clerk of the Circuit of Miami-Dade County, the City of Hialeah Conditional Building Permit and Estoppel Notice.
3. Prior to the issuance of a Certificate of Occupancy, I/We must meet all concurrency requirements of the City of Hialeah and of Florida Statute 163; furthermore, when condition 1A. applies, I/We must obtain a Certificate of Issuance from DERM for the City of Hialeah to release the Estoppel Notice and issue a Certificate of Occupancy.

STATE OF FLORIDA)
COUNTY OF DADE) ss:

BEFORE ME, the undersigned authority, personally appeared _____, who depose(s) that _____ has/have read the above information, and is/are fully aware of its contents and fully understand(s) what is required before the request can proceed.

Witness

Witness

Witness

Witness

ACKNOWLEDGED before me this _____ day of _____ 20_____.

Notary Public, State of Florida at Large

Print Name of Notary Public
My Commission Expires:

_____ DID take an oath _____ DID NOT take an oath