

Juan Fernandez-Barquin, Esq.
Clerk of the Court and Comptroller Of Miami-Dade County
Code Enforcement Division

DISCLAIMER

ENGLISH

In submitting this appeal, I affirm that I am the violator or a legal representative, corporate officer, or authorized agent of the violator with a notarized Power of Attorney. I certify that all information provided is true, accurate, legible, and complete to the best of my knowledge and meets all statutory requirements. I understand that the Clerk of the Court and Comptroller of Miami-Dade County makes no guarantees regarding the accuracy, completeness, or timeliness of submitted appeals, and any false or misleading information is the sole responsibility of the submitter. I further acknowledge that under Florida Statute 837.06, "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083."

SPANISH

Al presentar esta apelación, afirmo que soy el infractor o un representante legal, funcionario corporativo o agente autorizado del infractor con un poder notarial. Certifico que toda la información presentada es verídica, exacta, legible y completa según mi leal saber y entender, y que cumple con todos los requisitos legales. Entiendo que el Secretario de los Tribunales y Contralor del Condado de Miami-Dade no ofrece ninguna garantía con respecto a la exactitud, integridad o puntualidad de las apelaciones presentadas, y que cualquier información falsa o engañosa es responsabilidad exclusiva de quien la haya presentado. Reconozco además que, en virtud del Estatuto 837.06 de la Florida, "Quienquiera que, a sabiendas, haga una declaración falsa por escrito con la intención de engañar a un funcionario público en el cumplimiento de sus funciones oficiales será culpable de un delito menor de segundo grado, punible según lo dispuesto en los artículos 775.082 o 775.083".

KREYÒL

Lè mwen soumèt apèl sa a, mwen afime ke mwen se vyolatè a oubyen yon reprezantan legal, yon dirijan konpayi oswa yon ajan otorize vyolatè a, e ke mwen genyen yon pwokirasyon notarye. Mwen sètifye ke tout enfòmasyon mwen bay yo, yo vre, yo egzak, yo lizib e yo konplè dapre tout sa mwen konnen, e ke yo satisfè tout egzijans legal. Mwen konprann ke Grefye Tribinal ak Kontwolè Konte Miami-Dade la pa bay okenn garanti konsènan apèl moun soumèt, kòmkiwa si yo egzak, si yo konplè oswa si yo soumèt yo a tan, e ke tout fo enfòmasyon oswa enfòmasyon pou twonpe moun se responsablite moun ki soumèt yo a sèlman. Dapre Lwa 837.06 Florid, Mwen rekonèt tou, "Nenpòt moun ki, an tout konesans, fè fo deklarasyon alekri avèk entansyon pou twonpe yon fonksyonè nan egzèsis fonksyon ofisyèl li, va koupab yon krim dezyèm degre, ki merite pini jan sa prevwa nan s. 775.082 oswa s. 775.083."

REQUEST FOR HEARING

CLOCK IN

Appeal for Uniform Civil Violation Notice

-OR-

Appeal Notice of Assessment

To fulfill your request, you are required to submit a completed form accompanied by a copy of your citation through one of the following options:

Email:
cocceappeal@miamidadeclerk.gov

Mail / In-Person:
 111 N.W. 1st Street Suite #1750
 Miami, FL 33128
 9 AM - 4 PM (Office Hours)

Phone:
 (305)375-2333
Fax:
 (305)375-2731

I am requesting an administrative hearing to appeal the following Civil Violation Notice number(s):

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Requestor's Name:

Mailing Address:

Phone:

Email Address:

By affixing my signature below, I acknowledge that I have read and understand the disclaimer provided on page one, have completed the requested information accurately information provided above and agree to comply with the same.

Alleged Violator's Signature (Name Displayed on Citation)

Print Name: _____

Signature: _____ Date: _____

Authorized Agent's Signature (Corporate Officer, or Notarized Power of Attorney)

Print Name: _____

Signature: _____ Date: _____

Legal Representative's Signature (Licensed Attorney)

Print Name: _____ Bar Number: _____

Signature: _____ Date: _____