



PLEASE NOTE: Page Two and Page Seven need to be notarized. Page seven needs to be signed & notarized by the property owner or registered agent. **This information WILL be verified.**

CITY OF MIAMI
ZONING DEPARTMENT
444 S.W. 2nd Avenue, 4th Floor, Miami, FL 33130
Telephone No. 305.416.1499

Building Permit # (if construction is taking place) _____

Transaction ID _____
(ADMIN ONLY)# _____

APPLICATION FOR TEMPORARY USE AND OCCUPANCY PERMIT

It is intended that Temporary Use and Occupancy Permits be required where specified uses or characteristics of use are of a nature requiring mandatory technical determinations or reviews to establish special conditions and safeguards. In general, such determinations and review will normally be by agencies or officers other than the City Manager, and may involve matters such as design for traffic, parking and loading facilities, health and environmental considerations, and legal determinations.

The City Manager shall be responsible for the administrative and processing of applications for Temporary Use and Occupancy Permits, and for determination thereon.

Applicant Name _____ Address _____

City / State / Zip _____ Phone / Email _____

I (name and address above), the property owner or agent of the subject property, hereby applies to the City Manager of the City of Miami for approval of a Temporary Use and Occupancy Permit under the provisions of Chapter 62, Article XIII of the City Code.

Description of Event
(Please check one)

A Temporary Event limited to only two (2) events per year, two (2) weeks each on private property. The application fee is \$253.50 per permit.

A Temporary Event limited to only ten (10) events per year, two (2) weeks each on public property. The application fee is \$253.50 per permit.

A Temporary Use and Occupancy Permit limited to a two (2) year period. The application fee is \$503.50 per permit.

Zoning District: (IF YOU KNOW IT) _____

Address of property: _____

Nature of proposed use including costs of admission, inventory value, number of seats, number of employees, ect. As applicable (please attach separate sheet of paper if necessary): _____

Date and time of event: _____

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I attach the following in support or explanation of this application:

a) Legal description of property and /or survey, and /or floor plan.

b) **Site plan:**

Showing (as required) property boundaries, existing and proposed structure(s), parking, landscaping, screening, etc., with dimensions and computation of lot area, floor area ratio, lot coverage, etc.

c) Fee of \$_____ You can pay with a credit card or check at the NET office upon completion

d) Affidavit.

e) Notification of adjacent property owners, District Commissioner, and registered associations with original receipts.

f) Fire Department review.

g) Authorization if City property.

h) Lien Searches from Department of Finance and Office of Hearing Boards.

i) Other: _____.

Subject to all conditions and limitations of Chapter 62, Article XIII of the City Code. If appealed, the applicant must furnish full ownership disclosure.

Before me, the undersigned authority, authorized to administer oaths and take acknowledgements personally appeared:

(Name of applicant)

Who, after being first duly sworn upon oath deposes and says that he/she is the applicant for this Temporary Use or Occupancy Permit and that he/she has made and read the foregoing application and that the statements therein contained are true and correct and acknowledges that he/she I will be subject to requirements and limitations of Chapter 62, Article XIII of the City Code as amended

Signature

Sworn and subscribed to before me this _____ day of _____, 20_____.

Notary Public, State of Florida at large

My Commission Expires

CITY OF MIAMI
ZONING DEPARTMENT
444 S.W. 2nd Avenue, 4th Floor, Miami, FL 33130
Telephone No. 305.416.1499

Building recommendations: Approved
 Approved with Conditions (*see below*)
 Denied

Name _____ Date _____ Signature _____

Fire recommendations: (Special Events only)
 Approval
 Approval with Conditions (*see below*)
 Denial

Name _____ Date _____ Signature _____

Zoning recommendations: Approval
 Approval with Conditions (*see below*)
 Denial

Name _____ Date _____ Signature _____

Planning recommendations: Approval
 Approval with Conditions (*see below*)
 Denial

(Only for construction related TUP i.e Temp. Trailers & Fences)

Name _____ Date _____ Signature _____

City Manager (or designee) findings: Approval
 Approval with Conditions (*see below*)
 Denial

Name _____ Date _____ Signature _____

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**CITY OF MIAMI
 TEMPORARY USE AND OCCUPANCY PERMIT
 NOTIFICATION LETTER**

You are hereby notified that an application will be submitted by the above to the Office of the City Manager of the City of Miami for approval of a Temporary use or occupancy under the provisions of Chapter 62, Article XIII of the City Code, for the following purpose:

NOTIFICATION TO:	DATE:
ADDRESS:	

NAME OF APPLICANT	
STREET ADDRESS	
CITY, STATE, ZIP CODE	

SUBJECT PROPERTY	
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DATE / DURATION	
NUMBER OF PERSONS EXPECTED TO ATTEND	
DESCRIPTION OF EVENT	

This application will be reviewed for approval for a Temporary Use or Occupancy Permit; consequently the City Manager or his designee will have on file all documents, plans and supporting materials pertaining to this proposal. Should you wish to review this file, it will be made available to you after submittal and upon your request at the City of Miami Riverside Center, located at **444 SW 2nd Avenue, 4th Floor**. For an appointment, please call at **(305) 416-1499**.

The City Manager’s Office will take into consideration any comments you may have about the proposal; however, such comments will not be binding upon the decision of the City Manager or his designee.

The final decision of the City Manager may be appealed pursuant to provisions set forth in **Chapter 62, Article XIII of the City Code** within fifteen (15) days of the date of issuance of the Permit by filing a written appeal and appropriate fee with the Office of Hearing Boards located at **444 SW 2nd Avenue, 7th Floor, Miami, FL. 33130**. For an appointment, please call **(305) 416-2030**.

*The City Code requires that all **abutting property owners and registered Neighborhood or Homeowners Associations** be notified of **this Permit** application in an approved notification form as set forth in **Chapter 62 of the City Code**.*

OFFICE OF ZONING OR NET ADMINISTRATOR SIGNATURE: _____ DATE: _____

CITY OF MIAMI
ZONING DEPARTMENT
444 S.W. 2nd Avenue, 4th Floor, Miami, FL 33130
Telephone No. 305.416.1499

**INDEMNIFICATION / HOLD HARMLESS
AFFIDAVIT**

DATE: _____

RE: PROPERTY(S) LOCATED AT:

DATE
APPROVED _____

TO: CITY OF MIAMI, FLORIDA
ATTN: DIRECTOR OF ZONING
444 SW 2 AVENUE
4th FLOOR
MIAMI, FL 33130

City Manager or Designee

FROM: _____
Legal owner of the above property.

The undersigned hereby affirms that he/she is the legal owner of the above-referenced property. Furthermore; the undersigned hereby acknowledges that he/she has heretofore made application(s) for and received approval from the City of Miami, Florida, for the following:

Temporary Permit	# ___ - _____	On ___/___/20___	by <u>Office of Zoning</u>
		(Date approved)	(City dept. / City commission)
Temporary Permit	# ___ - _____	On ___/___/20___	by <u>Office of Zoning</u>
		(Date approved)	(City dept. / City commission)
Temporary Permit	# ___ - _____	On ___/___/20___	by <u>Office of Zoning</u>
		(Date approved)	(City dept. / City commission)

In connection with the foregoing, the undersigned is hereby requesting the City of Miami, Florida, to issue a building permit (s) for the construction of the following described improvement (s) on the property prior to the expiration of the deadline for the applicable appeal period

The undersigned understands that in connection with the above-referenced property the applicable appeal period deadline (s) for the above mentioned approval(s) is/are as follows:

_____/___/20__.

In consideration of the City of Miami, Florida agreeing to issue a building permit(s) to the undersigned as herein requested, the undersigned agrees as follows:

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**CITY OF MIAMI
INDEMNIFICATION / HOLD HARMLESS
AFFIDAVIT**

Permit # ___ - _____

- (a) The owner and affiant (name) agrees to pay all actual or estimated permit costs and other applicable city regulatory fees associated with the improvements requested to be built prior to issuance of any building permits by the City of Miami;
- (b) Acknowledge he/she is proceeding at their own risk and hereby agree to assume all responsibility and to indemnify, defend and hold harmless the City its officers agents and assigns in connection herewith;
- (c) Immediately cease all construction on the property if an appeal is filed within the appeal period;
- (d) Acknowledge that the City may impose conditions on approval which are required by State, County or City laws and regulations that are otherwise necessary to insure the public health, safety and welfare of the citizens of the City, and that the City may enforce the terms of this affidavit by its issuance of any building permit(s) ;
- (e) Acknowledge that the issuance of building permit(s) to the undersigned is not a grant of any vested right whatsoever for use or completion of construction on the property; and
- (f) To indemnify, defend, and hold harmless the City its officers, agents and assigns from any claims, demands, liabilities, losses, causes of action of any nature whatsoever arising out of or in connection with the permit(s) issued or any part thereof, from and against all cost, fees expenses, liabilities, any orders, judgments, or decrees which may be entered and from and against all costs for attorneys fees, expenses and liabilities incurred in the defense of such claim or in the investigation thereof.

Print Owner Name and Affiant's

Owner's Signature and Affiant's

(STATE OF FLORIDA
COUNTY OF MIAMI-DADE)

The undersigned instrument was acknowledged before me this ___ day of _____, 20____ he/she has personally appeared before me and is known to me or has produced _____ as identification and did (did not) take an oath.

Name:
Notary Public –State of Florida
Commission no:
My commission expires:

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FIRE DEPARTMENT QUESTIONNAIRE – Please answer all of the questions below so that the Fire Department can review the application.

1. How many people will be attending the event?
2. Is the address of the event shown on all the plans?
3. Is the name and dates of the event shown on all plans?
4. Did you provide a site plan and location sketch for this event?
5. Did you provide detailed dimensioned plans for the event?
6. Do the plans clearly identify the number and arrangement of exits?
7. Do the plans show several remote exits for the event?
8. Do the plans clearly identify the exit discharge path from all exits to a public street?
9. Did you provide flame spread certification for any temporary tents?
10. Are dimensions and words on the plans large enough to read?
11. Are the plans at least 1/8" or 1/4" scale?
12. Have they clearly identified any life safe risks (hazardous materials or processes, cooking, Generators) on the plans?
13. Have they obtained written permission from the Fire Marshal for serious life safety risks (indoor fire works, allowing vehicles inside of buildings, allowing festival seating inside a building) prior to plans approval?
14. Have fire inspectors or paramedics been assigned to the event?
15. Have police officers been assigned to the event?
16. Have you obtained written permission from the police to block any public street?
17. Have they obtained written permission from the Fire Marshal for fireworks after 11 PM?
18. Are there any fire sprinklers on the property?
19. Are there any fire alarms on the property?
20. Does the property have panic hardware?