

# Miami Shores Village Building Department

10050 N.E.2nd Avenue, Miami Shores, Florida 33138  
Tel: (305) 795.2204 Fax: (305) 756.8972  
INSPECTION'S PHONE NUMBER: (305) 762.4949

## RE-OCCUPANCY APPLICATION

Permit No. \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Buyer: \_\_\_\_\_ Seller: \_\_\_\_\_

Realtor: \_\_\_\_\_ Company Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ Miami Shores \_\_\_\_\_ State: \_\_\_\_\_ Florida \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby certify that I understand that the zoning for this property is for single-family residential use and that it is unlawful for more than one family to reside therein. I also understand that any Certificate of Re-Occupancy that may be issued by Miami Shores Village certifies only that the referenced property is being used for single family purposes and that such certificate does not constitute any representation, warranty or certification as to the condition of the dwelling or other structures on the property. In addition, I acknowledge the requirement for a swimming pool barrier to be in place and in compliance with code requirements at the time the pool was constructed, repair and or re-surface.

**APPLICANT'S AFFIDAVIT:** I certify that all the foregoing information is accurate.

**Applicant Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20 \_\_\_\_, by \_\_\_\_\_,  
who is personally known to me or who has produced \_\_\_\_\_  
\_\_\_\_\_ As identification and who did take an oath

### NOTARY PUBLIC:

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

RE-Occ: \$60.00

Notary: \$5.00

Total: \_\_\_\_\_

**Building Officials Approval:** \_\_\_\_\_