Instructions for Closure of a Miami-Dade County Permit(s)

The following information is needed:

1. _____A City of Miami Gardens Building permit application must be completely filled out providing address, folio no., owner’s information, Contractor and/or Architect/Engineer’s information, and on scope of work line item specify that it’s for a Miami-Dade County permit closure including permit number, the application must be signed and notarized by owner and contractor. (only when applicable)

2. _____You must hire a licensed contractor of the same trade and/or Architect/Engineer depending on scope of work.

3. _____The Contractor and/or Architect/Engineer must provide an affidavit (see attachment); the affidavit must include property address, folio no., Miami-Dade County permit number(s), and property owners’ name. No modifications of the affidavit will be permitted. The letter must be on the Contractor and/or Architect/Engineer’s letterhead including the qualifier’s license number and the signature must be notarized.

4. _____Owner’s signature must be notarized.

5. _____The fee for each expired Miami Dade County permit is $164.50.

FOR FURTHER INFORMATION PLEASE CONTACT BUILDING SERVICES AT 305-622-8027.
Date:

To: Building Official

Building and Planning Department

Re: Property Address
Folio Number
Expired Dade County Permit Number
Description of permitted work
Date permit issued

AFFIDAVIT FOR EXPIRED MIAMI-DADE COUNTY PERMIT

This is to certify that I have conducted a review of the plans and I have conducted an inspection at the above referenced property in order to confirm compliance with the approved plans and the Florida Building Code (including amendments) at the time the permit was obtained. If the plans pertain to a building or a structure, I further certify that the plans conform to the laws as to progress, type of construction and location; that any drawings show the structural design and that the plans and the design conform to the requirements of the technical codes as to strength, stresses, strains, loads and stability.

I fully understand that the City of Miami Gardens Building Division will not perform any plan review or field inspections and that the Building Official will rely solely upon this “sworn affidavit” to close out this permit.

State of ___________________________)  ss
County of _________________________)

I, _______________________________ hereby assume full responsibility for verifying such compliance and
(Engineer, Architect, Contractor)
attest that all work performed, if any, under this permit complies with the approved plans or other permitted documents and the Florida Building Code in effect at the time of permit, as well as all pertinent laws or ordinances including zoning regulations.

_____________________________
Signature of Architect/Engineer/Contractor

State of Florida  County of Miami Dade

Sworn to and subscribed before me this _________ day of ________________________________, _________
Personally known ___ or produced identification ___ No.: ______________________________ Exp: ___________

________________________
Signature of notary public