### **Monroe County Building Department**

# Administrative Appeal Monroe County Division of Administrative Hearings

Monroe County Code § 122-9

Appeals of administrative actions of the Floodplain Administrator must be filed with the Monroe County Building Department within thirty (30) days of the date of the decision

Non-refundable fee(s) due at submission will be charge based upon current Monroe County Building Department Fee Resolution.

Date of decision being appealed:    Date of decision being appealed:	Date of Submittal: / / / / / Month Day Year					
Appellant Name  Mailing Address (Street, City, State, Zip)  Property Owner Name  Mailing Address (Street, City, State, Zip)  Daytime Phone:  Email Address:  Email Address:	Decision being appealed:					
Appellant Name  Mailing Address (Street, City, State, Zip)  Property Owner Name  Mailing Address (Street, City, State, Zip)  Daytime Phone:  Email Address:  Email Address:	Data of decision being appealed:					
Mailing Address (Street, City, State, Zip)  Property Owner Name Mailing Address (Street, City, State, Zip)  If applicable Agent Name Mailing Address (Street, City, State, Zip)  Daytime Phone:  Email Address:  Email Address:  Email Address:  Email Address:	Month Day Year					
(Street, City, State, Zip)  Property Owner Name  Mailing Address (Street, City, State, Zip)  If applicable Agent Name  Mailing Address (Street, City, State, Zip)  Daytime Phone:  Email Address:  Email Address:	_ · ·	Daytime Phone:				
Name  Mailing Address (Street, City, State, Zip)  If applicable Agent Name  Mailing Address (Street, City, State,	(Street, City, State,	Email Address:				
Name  Mailing Address (Street, City, State, Zip)  If applicable Agent Name  Mailing Address (Street, City, State,	Property Owner	Daytime Phone:				
(Street, City, State, Zip)  If applicable Agent Name  Mailing Address (Street, City, State,						
Name  Mailing Address (Street, City, State,	(Street, City, State,	Email Address:				
Name  Mailing Address (Street, City, State,						
Mailing Address (Street, City, State,		Daytime Phone:				
(Street, City, State,		Email Address:				
	(Street, City, State,	Email Address:				

Please send the Executive Assistant, Monroe County Building Department, complete application to: 2798 Overseas Highway, Suite 300, Marathon, FL 33050



Monroe County Building Department

Middle Keys Office:2798 Overseas Highway,Marathon,FL,33050,(305) 289-2501 ❖ Lower Keys Office:5503 College Road,Key West,33040,(305) 295-3990

Upper Keys Office:102050 Overseas Highway,Key Largo,FL,33037,(305) 453-8800 ❖ Ocean Reef Office:11601 CR 905,Key Largo,FL 33037,(305) 453-8765

<a href="http://fl-monroecounty.civicplus.com/149/Building-and-Permitting">http://fl-monroecounty.civicplus.com/149/Building-and-Permitting</a>

## **Administrative Appeal Monroe County Division of Administrative Hearings**

#### **Legal Description of Property:**

(If in metes and bounds, attach legal description on separate sheet)

Block	Lot	Subdivision	Key	
Real E	Estate (RE) Number	Alternate K	ey Number	
Street	t Address (Street, City, State, Zip Code)		Approximate Mile Marker	
Land	Use District Designation(s):			
Flood	d Map Zone:			
Prese	ent Land Use of the Property:			
Are t	here any pending codes violation	s on the property?	Yes: No:	
If yes	s, please provide case number: _			
EVID EXPE BRIE LIMIT OF TI	ENCE INCLUDING TESTIMONY, ERT WITNESS THAT WILL BE CALF MUST, AT A MINIMUM, STATE	AFFIDAVITS AND LED MUST BE ATT ALL GROUNDS FO ED AND ANY FACTS NAL SHEETS OF PA	R THE APPEAL, INCLUDING BUT NOT S NECESSARY FOR INTERPRETATION PER).  complete application submittal:	
	Complete administrative appeal a	application (unaltere	d and unbound);	
	Correct non-refundable fee (chec	k or money order to N	Monroe County Building Department);	
	Proof of ownership (i.e. Warranty	Deed);		
	<b>Current Property Record Card(s)</b>	from the Monroe Co	ounty Property Appraiser;	
	A copy of the document(s), which comprise the administrative decision being appealed;			
Ц	Any evidence, record, permits an must be submitted with this appl	-	hich forms the basis for the appeal	
	Names and addresses of all expe	rt witnesses that yo	ou propose to call at the hearing;	
	Photograph(s) of site from adjace	ent roadway(s);		
	Photograph(s) of exterior and into	erior of space belov	v base flood elevation.	



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If applicable, the following must be submitted in order to have a complete application submittal:
Notarized Agent Authorization Letter (note: authorization is needed from all owner(s) of the subject property)
If deemed necessary to complete a full review of the application, the Floodplain Management Department reserves the right to request additional information.
If new evidence, or the basis for appeal, is submitted at the Board of County Commissioners hearing, Staff shall request that the hearing be continued to the next meeting so that Staff has the opportunity to prepare a response to the new evidence.
If the applicant does not submit the basis for the appeal with the application, then the application will be Deemed incomplete and returned to the applicant without submission to the Board of County Commissioners.
Appeal Procedure: Every decision of the Board shall be final, subject however to such remedy as any aggrieved party might have at law or in equity. Any such appeal will be limited to Appellate review of the record created before the Board. Please Note: A transcript made from recordings or other secondary means does not provide a sufficiently accurate record of all the speakers. Therefore, such "secondary" transcripts may not be accepted as valid verbatim transcripts, which is required for an appeal of the Final Order of the Division of Administrative Hearings.
I certify that I am familiar with the information contained in this application, and that to the best of my knowledge such information is true, complete and accurate.
Signature of Applicant: Date:
STATE OF FLORIDA COUNTY OF
Sworn to (or affirmed) and subscribed before me by means of $\square$ physical presence or $\square$ online notarization, this day of 20 (year), by
(Name of person making statement).
(Signature of Notary Public - State of Florida)
(Print, Type, or Stamp Commissioned Name of Notary Public) □ Personally Known OR □ Produced Identification Type of Identification Produced:
Notary Public My Commission Expires:

