



**Special Magistrate for Code Enforcement**

Phone: (321) 952-3430 • Fax: (321) 733-3086

**PETITION FOR RELIEF**

CITY OF PALM BAY v.

*(Name of Respondent as listed on Violation Notice)*

C.E. Case No.

NAME OF APPLICANT:

Owner                      Representative                      Prospective Buyer

NAME OF CURRENT OWNER:

*(IF DIFFERENT FROM APPLICANT)*

MAILING ADDRESS OF APPLICANT:

PHONE:

CELL PHONE:

E-MAIL:

ADDRESS OF PROPERTY:

NATURE OF VIOLATION:

THIS PROPERTY IS CURRENTLY OCCUPIED:      YES              NO

THIS PROPERTY IS CURRENTLY FACING FORECLOSURE:      YES              NO

THIS PROPERTY IS CURRENTLY INVOLVED IN OTHER LITIGATION:      YES              NO

AMOUNT OF REDUCTION YOU ARE SEEKING: \$

WHY SHOULD THE LIEN ON THIS PROPERTY BE REDUCED:

*(Attach additional pages if needed along with any supporting documentation)*

**APPLICANT MUST ATTEST TO THE FOLLOWING BY INITIALING EACH ITEM:**

All ad valorem property taxes, special assessments, utility charges and other government liens against the real property have been paid.

All Code violations have been corrected or a repair agreement has been executed.

**If Applicant Intends to be represented by an Attorney in this Matter, the following must be completed:**

NAME OF ATTORNEY:

ATTORNEY ADDRESS:

*Signature of Attorney*

*Date*

**If Not Represented by an Attorney, the following must be fully completed:**

I HEREBY CERTIFY, under penalty of perjury, that the Information contained herein is true and correct:

*Signature of Applicant / Petitioner*

*Date*

I HEREBY CERTIFY that I am the current owner of the property identified herein (or the lawful representative if the property is owned by a corporation, association or governmental unit) and that I consent to the filing of this Application:

*Signature of Property Owner*

*Date*

**NOTE: IF THE HOUSE IS OCCUPIED, YOU MUST BE PRESENT AT THE RESIDENCE ON THE DATE OF INSPECTION.**