



City of Haines City

Code Enforcement Department
 620 E Main Street • Haines City, FL 33844
 Phone (863) 421-9937 • Fax (863) 419-3168

Application for Reduction of Code Enforcement Fine(s) and Release of Lien(s)

All information fields must be completed before this application can be processed. Requests are not reviewed by The City or presented before The Special Magistrate until this application has been completed.

CONTACT INFORMATION

APPLICANT'S NAME:

PHONE:

FAX:

E-MAIL:

MAILING ADDRESS:

CITY:

STATE:

ZIP CODE:

ADDRESS TO MAIL RELEASE OF LIEN TO:

CITY:

STATE:

ZIP CODE:

AUTHORIZED REPRESENTATIVE'S NAME:

WRITTEN AND NOTARIZED AUTHORIZATION OWNER: Yes No

CASE INFORMATION

CASE NUMBER(S):

LIEN ADDRESS (PROPERTY SUBJECT TO THE LIEN(S)):

NAME OF CURRENT OWNER OF LIEN ADDRESS:

CURRENT OWNER'S RELATIONSHIP OR AFFILIATION WITH ENTITY/PERSON NAMED IN LIEN(S):

OTHER PROPERTY LOCATED IN HAINES CITY WHICH BELONGS TO CURRENT OWNER:

VIOLATION(S) AT LIEN ADDRESS WHEN LIEN(S) WERE PLACED:

WHO LIVED AT LIEN ADDRESS WHEN LIEN(S) WERE ASSESSED?

REASONS VIOLATION(S) NOT CORRECTED BEFORE LIEN(S) PLACED:

IS MONEY HELD IN ESCROW PENDING THE LIEN RELEASE HEARING AND IF YES, WHO WILL RECEIVE ESCROW MONEY IF THE LIEN(S) IS/ARE REDUCED? YES NO

WHAT IS THE REASON YOU ARE REQUESTING A REDUCTION OR RELEASE OF THE LIEN?

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Has the applicant previously applied for lien release/reduction for this property? Yes No
 If yes, when? _____ (month & year)

Applicants are required to complete the Fine list below and to provide copies of any lien they want considered in this Lien Release/Fine Reduction Application. To obtain information on fines/liens contact Haines City Code Enforcement at (863) 421-9937 or visit the Haines City Division of Code Enforcement at 620 E. Main St., Haines City.

Note: The Code Enforcement Division does not conduct Title or Lien searches, but will try to identify any additional liens that may pertain to this request based on the information provided by the applicant on Page 1 of this application. The Department is not responsible for any outstanding liens that may be omitted from this request.

Applicant is requesting the below lien(s) be:
 (Check all that apply)

- Release Completely
- Reduced
- Released from the Property located at _____ only.
 Lien(s) to remain in the name of the owner at time of lien.
- Other _____

Applicant's Request	
Amount of Fine	Date/Month Certified
\$	
\$	
\$	
\$	
\$	

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Under penalty of perjury Florida Statute 837.02 (1), the undersigned swears or affirms that the information provided on this three(3) page Application for Reduction of Code Enforcement Lien(s) is true and correct.

Applicant's Signature

Date

State of Florida
City of Haines City

The foregoing was sworn to and subscribed before me this ____ day of _____, 20____, by _____ He or she is personally known to me, or provided _____ as identification and did appear before me at the time of notarization.

Notary Public:

(Affix Notary Stamp)

Signature: _____

Printed Name: _____

My Commission Expires: _____

For City of Haines City Use Only

Application Accepted on: _____

Total Amount of Lien(s):\$ _____

Total Reduction Approved by The City: \$ _____

Other: _____
