



# REQUEST FOR ZONING DETERMINATION OF COMMUNITY RESIDENTIAL HOME

## REGULATIONS PER LAND DEVELOPMENT REGULATIONS CHAPTER 29. ARTICLE 5 SEC. 5-203(A) OF THE CITY CODE OF ORDINANCES

1. Community residential homes with **six (6) residents or less** are permitted within any residential zoning district provided that such homes shall not be located within a radius of 1,000 feet of another existing community residential home with six (6) residents or less.
2. Distance requirements shall be measured from the nearest point of the existing community residential home or area of single family zoning, to the nearest point of the proposed home.
3. Contact telephone number for manager shall be posted in a conspicuous location outside of the structure.

LICENSEE OR PROVIDER NAME & PHONE NUMBER \_\_\_\_\_

ADDRESS OF LICENSEE OR PROVIDER \_\_\_\_\_

NAME OF PROPOSED COMMUNITY RESIDENTIAL HOME \_\_\_\_\_

ADDRESS OF PROPOSED COMMUNITY RESIDENTIAL HOME (ONE PER FORM) \_\_\_\_\_

FOLIO NUMBER(S) \_\_\_\_\_

TYPE OF COMMUNITY RESIDENTIAL HOME (ALF, ADULT FAMILY CARE, DEVELOPMENTAL DISABILITIES, SUBSTANCE ABUSE, ETC.) \_\_\_\_\_

PROPOSED NUMBER OF RESIDENTS \_\_\_\_\_

I HEREBY REQUEST A DETERMINATION FROM THE CITY OF NORTH MIAMI AS TO WHETHER THE AFOREMENTIONED PROPOSED COMMUNITY RESIDENTIAL HOME MEETS THE REQUIRED 1,000-FT OR 1,200-FT (WHICHEVER APPLICABLE) DISTANCE REQUIREMENT FROM OTHER COMMUNITY RESIDENTIAL HOMES AS SPECIFIED IN FLORIDA STATUTE, I HEREBY SUBMIT THE REQUIRED NON-REFUNDABLE PROCESSING FEE OF **\$234** WITH THIS ZONING DETERMINATION REQUEST.

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SIGNATURE OF LICENSEE/PROVIDER



# REQUEST FOR ZONING DETERMINATION OF COMMUNITY RESIDENTIAL HOME

## REGULATIONS PER LAND DEVELOPMENT REGULATIONS CHAPTER 29. ARTICLE 5 SEC. 5-203(B) OF THE CITY CODE OF ORDINANCES

Community residential homes with **seven (7) to fourteen (14)** unrelated residents may be permitted provided that:

1. If new construction, the home complies with all regulations applicable to other multi-family uses in the area;
2. All applicable licensing requirements are met, including obtaining a city-issued BTR, contact information for the manager shall be posted in a conspicuous location outside of the structure;
3. The home would not result in such a concentration of such homes such that the character and nature of the area would be significantly altered;
4. That the home is not located within a radius of 1,200 feet of another existing community residential home in a multi-family zone district, distance requirements shall be measured from the nearest point of the existing community residential home or area of single family zoning, to the nearest point of the proposed home;
5. That the home is not located within a radius of 500 feet of an area zoned for single family.
6. Provided that the dwelling unit receives a certificate of use.

LICENSEE OR PROVIDER NAME & PHONE NUMBER \_\_\_\_\_

ADDRESS OF LICENSEE OR PROVIDER \_\_\_\_\_

NAME OF PROPOSED COMMUNITY RESIDENTIAL HOME \_\_\_\_\_

ADDRESS OF PROPOSED COMMUNITY RESIDENTIAL HOME (**ONE PER FORM**) \_\_\_\_\_

FOLIO NUMBER(S) \_\_\_\_\_

TYPE OF COMMUNITY RESIDENTIAL HOME (ALF, ADULT FAMILY CARE, DEVELOPMENTAL DISABILITIES, SUBSTANCE ABUSE, ETC.) \_\_\_\_\_

PROPOSED NUMBER OF RESIDENTS \_\_\_\_\_

**I HEREBY REQUEST A DETERMINATION FROM THE CITY OF NORTH MIAMI AS TO WHETHER THE AFOREMENTIONED PROPOSED COMMUNITY RESIDENTIAL HOME MEETS THE REQUIRED 1,000-FT OR 1,200-FT (WHICHEVER APPLICABLE) DISTANCE REQUIREMENT FROM OTHER COMMUNITY RESIDENTIAL HOMES AS SPECIFIED IN FLORIDA STATUTE, I HEREBY SUBMIT THE REQUIRED NON-REFUNDABLE PROCESSING FEE OF \$234 WITH THIS ZONING DETERMINATION REQUEST.**

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SIGNATURE OF LICENSEE/PROVIDER



# REQUEST FOR ZONING DETERMINATION OF AN ASSISTED LIVING FACILITY

## REGULATIONS PER LAND DEVELOPMENT REGULATIONS CHAPTER 29. ARTICLE 5, DIVISION 2, SEC. 5-202 OF THE CITY CODE OF ORDINANCES

- A. All adult living facilities shall comply with the occupancy standards of Chapter 5 of the City's code.
- B. All adult living facilities which are not owner-occupied shall have a primary designated manager(s) on a twenty-four-hour basis for which the owner(s) assume liability regarding actions, activities, and operation. The name of said primary manager(s) shall be conspicuously posted for both resident and public knowledge.
- C. There shall be a **minimum of two thousand (2,000) feet between any two (2) adult living facilities**, as measured from the nearest property line of an existing adult living facility to the property line of the proposed adult living facility.
- D. All adult living facilities shall be considered commercial enterprises for purposes of all City utilities and sanitation services.
- E. All development standards in the R-4 and R-5 districts and all other state criteria regulating an adult living facility shall apply.
- F. Maximum of two (2) people per bedroom.

LICENSEE OR PROVIDER NAME & PHONE NUMBER \_\_\_\_\_

ADDRESS OF LICENSEE OR PROVIDER \_\_\_\_\_

NAME OF PROPOSED COMMUNITY RESIDENTIAL HOME \_\_\_\_\_

ADDRESS OF PROPOSED COMMUNITY RESIDENTIAL HOME (**ONE PER FORM**) \_\_\_\_\_

FOLIO NUMBER(S) \_\_\_\_\_

TYPE OF COMMUNITY RESIDENTIAL HOME (ALF, ADULT FAMILY CARE, DEVELOPMENTAL DISABILITIES, SUBSTANCE ABUSE, ETC.) \_\_\_\_\_

PROPOSED NUMBER OF RESIDENTS \_\_\_\_\_

**I HEREBY REQUEST A DETERMINATION FROM THE CITY OF NORTH MIAMI AS TO WHETHER THE AFOREMENTIONED PROPOSED COMMUNITY RESIDENTIAL HOME MEETS THE REQUIRED 2,000-FT DISTANCE REQUIREMENT FROM OTHER COMMUNITY RESIDENTIAL HOMES AS SPECIFIED IN FLORIDA STATUTE, I HEREBY SUBMIT THE REQUIRED NON-REFUNDABLE PROCESSING FEE OF \$234 WITH THIS ZONING DETERMINATION REQUEST.**

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SIGNATURE OF LICENSEE/PROVIDER