



DATE: _____

MAIL TO: Nicole A. Banks
Department of Building & Zoning
12340 N. E. 8 Avenue, North Miami, FL 33161

Requestor's Name
or Company Name _____
Last First

Requestor's Address: _____
Street

City State ZIP

Requestor's Phone #: _____ FAX #: _____

Enclosed is Check # _____ for \$75. Your Receipt # is _____
(Payable to: City of North Miami)

**REQUEST: ACTIVE PERMITS & OPEN COMPLAINTS (VIOLATIONS)
FOR THE PROPERTY LOCATED AT:**

RESPONSE:

_____ Active Permits (see attached)
*For more information contact the Building Official, John Jackson, at
(305) 895-9820, ext. 12178.*

_____ Open Complaints (see attached)
*For more information you can reach the contact person at (305) 893-6511 at
the extension indicated on the attachment.*

Signature of Employee assisting: _____

as of (Date): _____

**PLEASE NOTE: A Re-occupancy Inspection is required for residential properties (which include
condominiums, single-family, duplex, tri-plex & apartments) prior to closing; otherwise a complaint
will be initiated.**

