



Code Enforcement Division
120 S. Florida Avenue, DeLand, FL 32720
386-626-7037

REQUEST FOR REDUCTION OF FINES

INSTRUCTIONS:

A completed Fine Reduction Request Form must be submitted no later than 30 days prior to the regularly scheduled Special Magistrate Meeting which is scheduled the Fourth Thursday of each month.

The property sited for the violation must be in **compliance** with all City Codes prior to submittal of an application request for reduction of fines and all applicable City accounts e.g. water bill, building permits, business tax receipts, etc., must be up to date.

The applicant must schedule an appointment with the City Code Officer who will perform an initial inspection on the property and determine if the property qualifies.

If new violations are discovered at this inspection, the owner/applicant will be notified in writing.

An Affidavit of Compliance prepared by the City Officer shall be attached to the application.

City Staff will prepare a written response and recommendation and submit along with the completed application and supporting documentation. The Special Magistrate will make a recommendation to the City Manager for Final Approval.

The Magistrate's decision will be based on the record of the case, this petition, along with any documents in support thereof, and the City's written response, and shall be submitted to the City Manager for approval.

Once the City Manager approves the reduction, the property owner will be notified. The payment must be received within the timeframe indicated on the order or the fine reverts to its original amount and shall not be reconsidered for reduction.

**Submit the Completed Form and \$100 Application Fee
along with any supporting documentation to:**

**City of DeLand
Code Enforcement Division
120 S. Florida Avenue
DeLand, FL 32720**

Make Check Payable to: City of DeLand Code Enforcement

INCOMPLETE FORMS WILL NOT BE ACCEPTED.



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Property Owners' Name:	
Petitioner Name(if different from above):	
If Petitioner is not the owner of record, you MUST provide a Power of Attorney or other legal documentation as to your relationship to the property and authority to submit this petition. Copies of documents must be attached.	
Property Address: (Location of Violations)	
Mailing Address (if different from above)	
Mobile Phone:	
Home Phone:	
E-mail Address:	
Attach additional pages to provide detail to below answers	
Are you claiming a medical/financial or other type of hardship? IF YES, Describe the hardship and how it relates to compliance with the order.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were the costs to bring the property into compliance significant? IF YES, Attach verifiable receipts for expenses related to correcting the code violation.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did compliance involve coordination with other agencies which affected compliance in a timely manner? IF YES, Explain in detail why this affected ability to comply in a timely manner.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were there any additional extenuating circumstances beyond those listed above which related to your inability to comply with the requirements set forth by the Magistrate? IF YES, Describe and Explain in detail why this affected ability to comply in a timely manner.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this property the subject of a foreclosure? IF YES, Attach a copy of the Certificate of Title, Lis Pendens and/or Final Summary Judgment of Mortgage Foreclosure.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does this property have a contract for sale pending? IF YES, Attach approved contract.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the pending sale? IF YES, Attach approval from the bank of record.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Anticipated Closing Date:	
Are there other legal proceedings (eviction, bankruptcy, divorce, etc.) pending? IF YES, Describe and Explain in detail why this affected ability to comply in a timely manner.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Application MUST be accompanied by a check/money order made out to the City of DeLand Code Enforcement for the Administrative Fee of \$100

I hereby acknowledge that this application is complete as submitted.

Signature

Date

This application and any attachments shall become public record once submitted.