



6601 Main St • Miami Lakes, Florida, 33014
Office: (305) 827-4015 • Fax: (305) 558-9884
Website: www.miamilakes-fl.gov

BUILDING PERMIT APPLICATION

Job Address: 7870 NW 163rd Street

Unit #:

Folio #: 32-20150310230 Owner-Builder: ☒

Master Permit #: _____ Sub Permit #: _____ Revision #: _____

OWNER INFORMATION		LEGAL USE/WORK	
NAME: <u>Daniel Fornes</u>		Current Use of Property: <u>SFR</u>	
Address: <u>7870 NW 163rd St</u>		Job Description: <u>Tiki Hut</u>	
City, State, Zip: <u>Miami Lakes FL 33016</u>			
Phone #: <u>786-506-0355</u> Cell #: _____		JOB COST \$ _____ AREA/LENGTH: _____ SF/LF	
Email Address: <u>daniel.fornes@gmail.com</u>		Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐	
		Code in Effect: _____	
		Occupancy: _____	
		Construction Type: _____	
		Flood Zone/B.F.E.: _____ F.F.E.: _____	
Company Name: _____		Firm Name: _____	
Qualifier Name: _____		A/E of record: _____	
License # _____		License # _____	
Address _____		Address _____	
City, State, Zip _____		City, State, Zip _____	
Phone #: _____ Cell #: _____		Phone #: _____ Cell #: _____	
Email Address: _____		Email Address: _____	

CONTRACTOR INFORMATION		ARCHITECT/ENGINEER	
Permit Type -- Check only One		Change to Permit -- Check only One	
☒ Building	☐ Electrical	☐ Extension	☐ Renewal
☐ Paving/Drainage	☐ Sign	☐ Change Contractor	☐ Shop Drawing
☐ Mechanical	☐ Roofing	☐ Revision	☐ Cancellation
☐ Plumbing/Gas	☐ P/W		

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards, of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, RE-ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I Certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

X Daniel Fornes 11/10/2025
Signature of Owner or Owner's Agent Date

X _____
Signature of Qualifier Date

Daniel Fornes
Print Name of Owner or Owner's Agent

Print Name of Qualifier

STATE OF _____ COUNTY OF _____

Sworn to and subscribed before me this _____ 20____

by _____ (SEAL)

Personally known ☐ or I.D. _____

STATE OF _____ COUNTY OF _____

Sworn to and subscribed before me this _____ 20____

by _____ (SEAL)

Personally known ☐ or I.D. _____

NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions enforced by the homeowner's associations that may be applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

NOTE: This application will be void if there are no reviews after six(6) months.



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HOMEOWNER'S ASSOCIATION/COMMERCIAL/ARCHITECTURAL CONTROL COMMITTEE ("HOA/ACC") AFFIDAVIT

****NOTE: Whether you have an HOA or not, it is a requirement to complete this affidavit as part of your permit application submittal package.****

The undersigned individual, being duly sworn, deposes and says that:

1. He/She is the owner of property located at 7870 NW 16 St (identify address), which is part of the _____ (identify neighborhood/subdivision/Homeowner Association "HOA"/Architectural Control Committee "ACC" if applicable) and has submitted the attached building permit application to the Town of Miami Lakes; and
2. He/She is owner of property which may be subject to certain conditions and deed restrictions; and
3. He/She is fully informed regarding any applicable deed restrictions and HOA/ACC requirements for building on or making changes to their property; and
4. He/She is aware that the Town recommends, although not required, that the he/she secure any required approvals from their HOA/ACC, prior to submitting this building permit application; and
5. He/She acknowledges that the issuance of a building permit does not independently satisfy any applicable HOA/ACC approval requirements and that the Town does not enforce any deed restrictions upon said property.

Signature

Print Name

Date

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

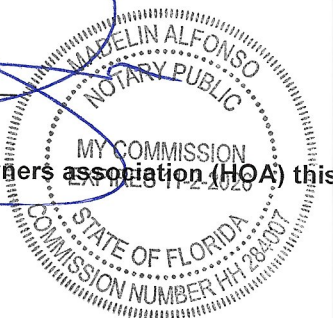
) SS:

BEFORE ME, an officer duly authorized by law to administer oaths and take acknowledgments, personally appeared Daniel Fornes as owner of said property described herein, on this date executed the foregoing Affidavit for the purposes mentioned in the Affidavit. He/She is personally known to me or has produced _____ as identification.

IN WITNESS OF THE FOREGOING, I have set my hand and official seal at in the State and County aforesaid on this 12 day of March, 2020

My Commission Expires: 11/02/2026

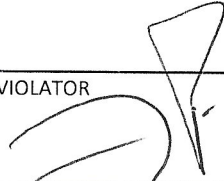
Notary Public, State of Florida



***Note: Please be advised that in addition to any written recommendations from your homeowners association (HOA) this affidavit must be filled out.**



Town of Miami Lakes
Uniform Civil Violation Notice
Code Compliance Department
6601 Main Street
Miami Lakes, FL 33014
(305) 512-7130

DATE ISSUED 10/10/2025	TIME ISSUED 2:45 PM	CODE COMPLIANCE OFFICER NAME HUGO GONZALEZ	
NAME OF VIOLATOR DANIEL FORNEZ		FOLIO # 3220150310230	CASE NUMBER C2024-1208
		REPEAT VIOLATION ☐ YES ☒ NO	
MAILING ADDRESS OF VIOLATOR (Street, City, State, and Zip) 7870 NW 163 ST, MIAMI LAKES, FL, 33016			
THIS NOTICE SUMMONS YOU TO ANSWER THE COMPLAINT THAT ON <u>10/10/2025</u> AT <u>2:41PM</u> YOU COMMITTED A VIOLATION OF SECTION(S) <u>8-1 OF THE MIAMI DADE COUNTY CODE, AS APPLICABLE</u> TO THE MIAMI LAKES CODE TO WIT: <u>SEC 8-1 OF THE TOWN CODES AND SECTION 105.1. OF THE FLORIDA BUILDING CODE (2020) FAILURE TO OBTAIN A BUILDING PERMIT</u>			
DESCRIPTION OF FACTS AT <u>7870 NW 163 ST</u> LOCATION OF VIOLATION			
YOU SHALL: 1. PAY THE CIVIL PENALTY OF <u>\$500.00</u> ON OR BEFORE <u>10/30/2025</u> AND CORRECT THE VIOLATION(S) ON OR BEFORE <u>10/30/2025</u> 2. YOU MAY REQUEST AN ADMINISTRATIVE HEARING BEFORE A HEARING OFFICER TO APPEAL THE DECISION OF THE CODE COMPLIANCE OFFICER ON OR BEFORE <u>10/30/2025</u> FAILURE TO PAY THE CIVIL PENALTY AND CORRECT VIOLATION(S) OR FILE A REQUEST FOR ADMINISTRATIVE HEARING BY THE DATES SHOWN SHALL CONSTITUTE A WAIVER OF YOUR RIGHT TO A HEARING AND SUCH WAIVER SHALL CONSTITUTE AN ADMISSION OF THE VIOLATION(S). EACH DAY OF CONTINUED VIOLATION AFTER THE TIME PERIOD FOR CORRECTION SHALL BE DEEMED A CONTINUING VIOLATION SUBJECT TO ADDITIONAL PENALTIES IN THE SAME AMOUNT WITHOUT THE NEED FOR ISSUANCE OF AN ADDITIONAL CIVIL VIOLATION NOTICE. I ACKNOWLEDGE RECEIPT OF THIS CIVIL VIOLATION NOTICE. I UNDERSTAND THAT ACCEPTANCE OF THIS VIOLATION NOTICE IS NOT AN ADMISSION OF GUILT.			
VIOLATOR 		DATE <u>10/10/25</u>	
CODE COMPLIANCE OFFICER'S SIGNATURE		DATE	
		SERVICE: ☐ PERSONAL ☒ MAIL ☐ POSTING (Check all the above that are applicable)	
CITATION C2024-1208			

INSTRUCTIONS

1. PAYMENTS AND REQUEST FOR HEARING SHOULD BE SUBMITTED IN WRITING AND DIRECTED TO:

TOWN OF MIAMI LAKES
6601 Main Street, Suite 105
Miami Lakes, FL 33014
(305) 512-7130
codecompliance@miamilakes-fl.gov

PAYMENT OF THE CIVIL PENALTY DOES NOT CONSTITUTE A CORRECTION OF THE VIOLATION. IT IS YOUR RESPONSIBILITY TO REQUEST AN INSPECTION TO DETERMINE COMPLIANCE WITH THIS UNIFORM CIVIL VIOLATION NOTICE.

2. HEARINGS WILL BE SET NO SOONER THAN 20 DAYS FROM THE DATE OF THE CIVIL VIOLATION NOTICE AND ALL PARTIES WILL BE NOTIFIED AT THE MAILING ADDRESS SHOWN ON THIS NOTICE.

3. YOU MAY APPEAR WITH OR WITHOUT COUNSEL AND PRODUCE WITNESSES ON YOUR OWN BEHALF.

4. YOU MAY BE LIABLE FOR REASONABLE COSTS OF THE ADMINISTRATIVE HEARING, AS WELL AS THE TOWN'S COSTS AND EXPENSES INCURRED AS A RESULT OF INVESTIGATION, ENFORCEMENT, TESTING, OR MONITORING, UPON A FINDING OF GUILT.

5. LIENS IN THE AMOUNT OF UNPAID PENALTIES CAN BE FILED AGAINST YOUR REAL OR PERSONAL PROPERTY AND MAY BE FORECLOSED.

INSTRUCCIONES

1. LOS PAGOS Y PEDIDOS PARA AUDIENCIAS DEBEN SER HECHAS POR ESCRITO Y DIRIGIDOS A:

TOWN OF MIAMI LAKES
6601 Main Street, Suite 105
Miami Lakes, FL 33014
(305) 512-7130
codecompliance@miamilakes-fl.gov

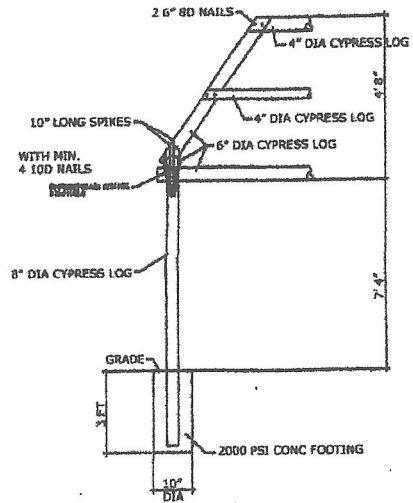
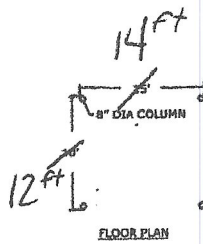
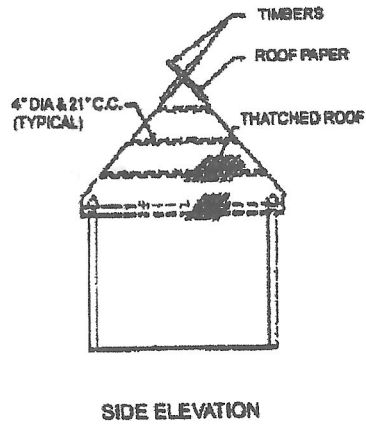
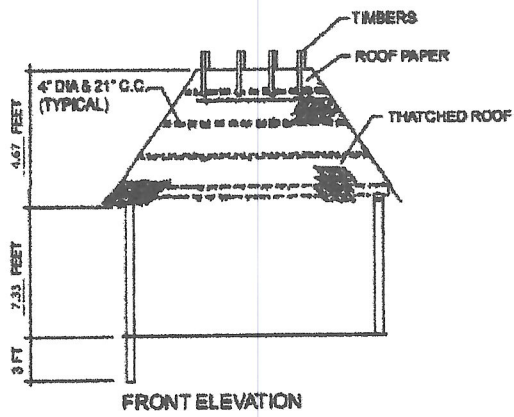
PAGAR UNA MULTA CIVIL NO EQUIVALE HABER CORREJIDO LA VIOLACION, ES SU RESPONSABILIDAD PEDIR UNA INSPECCION PARA DETERMINAR SI SE CUMPLIO CON LOS REQUISITOS DE LA LEY.

2. LAS AUDIENCIAS SERAN FIJADAS NO MENOS DE VEINTE (20) DIAS DESPUES DE LA FECHA DE LA VIOLACION. LA FECHA DE AUDIENCIA SERA ENVIADA A LA DIRECCION QUE APARECE AL FRENTE DE ESTA VIOLACION.

3. USTED PODRA COMPARECER CON UN ASESOR LEGAL O SIN EL Y PRODUCIR TESTIGOS Y PRUEBAS EN SU DEFENSA.

4. SI SE LE ENCUENTRA CULPABLE, USTED PODRIA SER RESPONSABLE POR LOS COSTOS RAZONABLES DE LA AUDIENCIA ADMINISTRATIVA, Y LOS GASTOS INCURRIDOS POR LA CIUDAD A RESULTADO DE INVESTIGACIONES, EJECUCION, PRUEBAS O VIGILANCIA DE LA PROPIEDAD.

5. VIOLACIONES NO PAGADAS PODRIAN CONSTITUIR UN EMBARGO CONTRA SU PROPIEDAD EN EL SALDO DE LAS PENALIDADES NO PAGADAS. PENALIDADES SIN PAGAR PODRIAN SER PUESTAS SOBRE SU PROPIEDAD



- Post to Home 6 FT, 2 IN
- Post to Fence 6 FT, 4 IN
- Roof to Roof 5 FT
- Roof Edge to Roof Edge 4.5 FT

