

AMNESTY APPLICATION FORM



City of Cape Coral Code Compliance
P.O. Box 150027
Cape Coral, FL 33915-0027
Phone (239) 574-0613
Fax (239) 574-0611

Property Owner(s) Name: _____ Phone Number: _____

Site Property Address: _____

Reason for Request: _____

Upon receipt of a request for reduction, the City Manager or the City Manager's designee together with the City Attorney or the City Attorney's designee, shall review the facts surrounding the imposition of the code compliance lien, the reason for the request for reduction and whether the property is currently in compliance.

1. All fines and liens must have been assessed prior to June 1, 2007 by the City of Cape Coral Code Enforcement Board or Special Magistrate.
2. An amnesty application must be submitted by the property owner or the property owner's legal representative.
3. All property violations cited must be in compliance and verified by the Code Compliance Division before an application for amnesty may be approved.
4. Prosecution and administrative costs are not eligible for reduction and must be paid in full prior to any release of lien(s).
5. If payment is received between May 1, 2008 and July 31, 2008, then the property owner will be eligible to settle the face value of their outstanding code fines by paying twenty-five percent (25%) of the face value of the lien or the sum of Five Thousand Dollars (\$5,000.00), whichever amount is less.
6. If payment is received between August 1, 2008 and October 31, 2008, then the property owner will be eligible to settle the face value of their outstanding code fines by paying fifty percent (50%) of the face value of the lien or the sum of Ten Thousand Dollars (\$10,000.00), whichever amount is less.
7. If payment is received between November 1, 2008 and January 31, 2009, then the property owner will be eligible to settle the face value of their outstanding code fines by paying seventy-five percent (75%) of the face value of the lien or the sum of Fifteen Thousand Dollars (\$15,000.00), whichever amount is less.
8. If payment is received on or after February 1, 2009, no release of lien is available pursuant to this program.

Your signature below authorizes the City Manager to consider the subject property to be considered for the City of Cape Coral Amnesty Program.

Signature of Property Owner(s)

Date

Date

LIEN REDUCTION PROGRAM WORKSHEET



City of Cape Coral Code Compliance
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Property Owner(s) Name: _____ Phone Number: _____

Site Property Address: _____

Case #: _____

Complied: Yes / No Affidavit of Compliance issued? Yes / No

Date LIEN was Recorded: _____

(Circle if applicable): Foreclosed / Bankruptcy / New Owner: _____

Notes: _____

Original LIEN Amount \$ _____
Minus _____ % or \$ _____
Plus Prosecutorial Fee \$ _____
Plus Recording Fee \$ _____
Plus Release Fee \$ _____
Plus Other Cost \$ _____

Adjusted amount of LIEN due: \$ _____

After considering the foregoing, it is____, it is not ____ the recommendation to reduce the Code Compliance LIEN and execute a Satisfaction of LIEN or Release of LIEN.

City Manager Date

City Attorney or Designee Date

City Manager's Designee Date

Case Maintenance Personnel Date