



**CITY OF DORAL  
CODE COMPLIANCE DEPARTMENT  
SPECIAL MAGISTRATE**

SM CASE NO: C \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**REQUEST FOR REHEARING**

*This is Request for Rehearing of the Special Magistrate's Findings of Fact, Conclusions of Law and Order entered in the above-referenced case. By completing this form, you are making statements under oath. Failure to be truthful is a violation of Florida Statutes pertaining to perjury, which is a felony punishable by up to 15 years imprisonment.*

**INSTRUCTIONS:**

Please complete both pages of this form and be specific when writing your statements. **Be advised that this form and any attachments will become public record.** When the form is complete, please send the form via email to the following recipients:

Evelyn Freile, Special Magistrate Coordinator, [evelyn.freile@cityofdoral.com](mailto:evelyn.freile@cityofdoral.com)  
Danny Del Toro, Director of Code Compliance [danny.deltoro@cityofdoral.com](mailto:danny.deltoro@cityofdoral.com)

After our department receives and reviews the form, you will receive a written response back confirming the location, time, and date of the next available Special Magistrate Hearing. The officer also will issue a Notice to Appear Before the Special Magistrate that you will receive by hand delivery, posting, regular and/or certified mail. Should you have any questions, please contact the Code Compliance Department at 305-593-6680.

**INCOMPLETE FORMS WILL NOT BE ACCEPTED**

Please note that if you have exercised your right to appeal the Special Magistrate's Findings of Fact, Conclusions of Law and Order by filing a Notice of Appeal in the Circuit Court for the Eleventh Judicial Circuit in and for Miami-Dade County Florida, the Special Magistrate does not have jurisdiction to consider this request.

Name of person requesting the rehearing: \_\_\_\_\_

Phone: \_\_\_\_\_

Name of property owner: \_\_\_\_\_



**CITY OF DORAL  
CODE COMPLIANCE DEPARTMENT  
SPECIAL MAGISTRATE**

Property address that is the subject of the Special Magistrate Case Number referenced above:

\_\_\_\_\_

The date of the Special Magistrate's Findings of Fact, Conclusions of Law and Order of which you seek a rehearing: \_\_\_\_\_ (please attach a copy of the Order)

***You will not be given an opportunity to address the Magistrate concerning this Request for Rehearing. Make certain that this form and any attachments completely set forth your position. Your request should include new evidence or circumstances that were not presented to the Special Magistrate at the original hearing. Your request should also state the reason(s) that this new information was not presented to the Magistrate. Upon consideration of your request, the Magistrate make the decision whether to grant or deny a rehearing. If the Special Magistrate grants your request for a rehearing, the Respondent and the City will present the case at the next regularly scheduled Special Magistrate Hearing.***

I, \_\_\_\_\_, do hereby submit this Request for Rehearing of the Special Magistrate's Findings of Fact, Conclusions of Law and Order entered in the above-referenced case, and in support thereof offer the following statements:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(If additional space is required, please attach)



**CITY OF DORAL  
CODE COMPLIANCE DEPARTMENT  
SPECIAL MAGISTRATE**

DATE: \_\_\_\_\_ Signed: \_\_\_\_\_

STATE OF \_\_\_\_\_ Print Name: \_\_\_\_\_

COUNTY OF \_\_\_\_\_

PERSONALLY appeared before me, the undersigned authority duly authorized to administer oaths and take acknowledgements, \_\_\_\_\_, who first being duly sworn, acknowledged before me that the information contained herein is true and correct. He/She is/is not personally known to me and has produced a Florida Driver's License as identification and did/did not take an oath.

FDL# \_\_\_\_\_ My Commission Expires:

\_\_\_\_\_  
Notary Public

Date \_\_\_\_\_

**NOTE: IF YOU ARE NOT ABLE TO COMMUNICATE, OR ARE NOT COMFORTABLE EXPRESSING YOURSELF, IN THE ENGLISH LANGUAGE, IT IS YOUR RESPONSIBILITY TO BRING AN ENGLISH-SPEAKING INTERPRETER TO THE HEARING. THIS PERSON MAY BE A FRIEND, RELATIVE OR SOMEONE ELSE TO INTERPRET FOR YOU DURING YOUR APPEARANCE AT THE HEARING. A MINOR CHILD CANNOT SERVE AS A VALID INTERPRETER. THE CITY OF DORAL DOES NOT PROVIDE INTERPRETATION SERVICES DURING ANY QUASI-JUDICIAL PROCEEDING.**

**NOTA: SI USTED NO ESTÁ EN CAPACIDAD DE COMUNICARSE, O NO SE SIENTE CÓMODO AL EXPRESARSE EN INGLÉS, ES DE SU RESPONSABILIDAD TRAER UN INTÉRPRETE DEL IDIOMA INGLÉS A LA AUDIENCIA. ESTA PERSONA PUEDE SER UN AMIGO, FAMILIAR O ALGUIEN QUE LE HAGA LA TRADUCCIÓN DURANTE SU COMPARECENCIA A LA AUDIENCIA. UN MENOR DE EDAD NO PUEDE SER INTÉRPRETE. LA CIUDAD DE DORAL NO SUMINISTRA SERVICIO DE TRADUCCIÓN DURANTE NINGÚN PROCEDIMIENTO DELANTE DE LOS MAGISTRADOS.**