



TOWN OF LOXAHATCHEE GROVES

Code Compliance Division • 155 F Road • Loxahatchee Groves, Florida 33470

561-807-6670 • loxahatcheegrovesfl.gov

Lien Reduction Application Instructions

The Special Magistrate has the discretionary authority to reduce fines and liens pursuant to Chapter 162, Florida Statutes. A person or entity requesting a release of lien has no right to the reduction or release of a fine or lien. **Lien reduction is not available if the Lien Address (property subject to the lien), or other properties owned by the property owner and applicant have any active code cases, unless the Applicant is a prior owner and qualifies for an exception provided for herein.**

In order to request a hearing for a lien reduction or release:

- Fill out the paperwork **COMPLETELY**. Do not leave any blanks. Make sure that you include correct information to contact you AND any designated agents. You must include the case number of the lien.
- An Applicant is defined as the current property owner, prior owner (as permitted herein), or prospective purchaser and/or their agent (as designated herein). **Applicant** (not agent) must sign and have notarized the Designated Agent Affidavit if applicable.
- The following preliminary conditions must be met for a reduction of a lien to be considered by the Special Magistrate:
 - The underlying violation, which resulted in the order of violation and ultimate lien imposition, did not endanger any person's health, life or safety. The determination of whether the underlying violation endangered violation any person's health, life or safety will be made by the Town Manager or their designee.
 - An affidavit of compliance has been issued and mailed to the petitioner for the real property that confirms the property is in compliance with the violations addressed in the special magistrate's order. If you do not know if the subject property is in compliance, then you can contact the Town's Code Compliance Division for a Code Officer to inspect the applicant's property(ies). If the Code Compliance Officer verifies compliance, they will update the property record and send to you the Affidavit of Compliance which can be included in the Lien Reduction submittal. If the Code Compliance Officer is not able to confirm compliance, a notice identifying the outstanding issues will be sent to the property owner.
 - The subject property and all other real property owned by the petitioner within the town must be in compliance with the town's code of ordinances. 4. All outstanding code enforcement administrative costs and the petition fee have been paid in full.
 - The petitioner has no overdue or delinquent accounts with the town, including but not limited to, town taxes, permit fees, and cost recovery accounts. If the above conditions are not satisfied, the petition will be denied, and the town will mail a copy of the notice of denial to the petitioner by regular U.S. Mail to the address provided in the petition.

If the above conditions are not satisfied, the petition will be denied, and the town will mail a copy of the notice of denial to the petitioner by regular U.S. Mail to the address provided in the petition.

- Liens/fines associated with hard costs must be paid in full and are not subject to negotiation. These costs include but may not be limited to lot clearing, board up, demolition and condemnation costs.
- If the property is under contract for sale, a copy of the executed sales contract must be submitted with the application. If a prospective purchaser is the Applicant, the lien reduction order will be contingent upon the transfer of title to the property.

- Please attach the following documents if applicable:
 - Timeline detailing the existing liens and any foreclosure proceedings.
 - Any documents, such as receipts or color photos that support your request.
 - Pending Sales Contract and addendum or closing statement.
 - Certificate of Title, Lis Pendens and/or Final Summary Judgment of Foreclosure.
 - Writ of Possession.
 - Title Insurance Policy.
 - If the property was purchased within the past 60 days, the closing statement must be provided.
- Hearings are normally held the first Monday of each month. In order for a case to be scheduled to appear before the Special Magistrate all requirements must be met three (3) weeks prior to the scheduled Special Magistrate meeting. Applicants and/or Designated Agents will be notified of the hearing date by regular mail. The Applicant or its Agent must be present at the Special Magistrate Hearing. If the Applicant does not appear, the application will be automatically be deemed denied. If your application is deemed denied pursuant to this section, and you desire to seek lien reduction in the future, you must submit a new application, pay the applicable application and inspection fees and begin the inspection process anew accordance with the lien reduction regulations.
- The special magistrate may make one of the following determinations: (i) grant the application and reduce the fine/lien to a specified amount, which shall not exceed seventy-five (75%) percent of the fine/lien amount; or (ii) deny the application for a reduction.
- If the reduction is granted, the Special Magistrate's order shall include a date certain for the payment of the reduced fine/lien and shall include a statement that if the reduced fine/lien is not paid in full on the date provided, the lien/ fine amount shall automatically revert back to the original amount.
- In evaluating a request for a lien to be reduced, the Special Magistrate will consider the following:
 - 1. The gravity of the violation;
 - 2. Any action(s) taken by the petitioner to correct the violation(s);
 - 3. Any previous violations committed by the petitioner;
 - 4. Any recommendation of the town administration;
 - 5. Whether the Petitioner or managing member of the Petitioner owns other properties in the town, and how many had other code cases or other liens;
 - 6. Whether the Petitioner owned or was the managing member or the property for which the lien was placed at the time the lien was placed;
 - 7. Any other factor which may show a hardship on the Petitioner requesting the release or which may provide a reasonable basis for the requested relief;
 - 8. The length of time between the ordered compliance date and the date the violation was eliminated;
 - 9. Any actual costs expended by the owner to cure the violation as provided by supporting documentation, including payment of town licensing or permit fees;
 - 10. Any other matter suggesting that the lien reduction is or is not equitable and/or in the best interests of the town.

- In order to submit this application, a non-refundable Application Fee of \$500.00 for each lien reduction or \$300 for each partial lien reduction must be paid to the Town. The application fee is meant to offset the Town's cost in evaluating the application, including the need to review the code compliance case file and to perform one inspection on the property. Any additional inspections will result in an additional inspection fee of \$35.00 per inspection. This means if more than one property needs to be inspected, or if the property is not in compliance and the Applicant calls for re-inspection there will be a fee of \$35.00 for each additional inspection. The application fee and any additional inspection fees are not partial payment of any code compliance fines or previous costs incurred by the Town in the code compliance process.

REQUEST FOR REDUCTION OF LIEN
OR PARTIAL RELEASE OF LIEN

INSTRUCTIONS: **Property must be in FULL compliance prior to appearing before the Special Magistrate.** Please fill out this form completely and sign and notarize the Designation of Agent Affidavit (if applicable). Be specific when writing your statement. Please return this ORIGINAL form to the Code Compliance Division at the above address. The Special Magistrate will consider requests for waivers/reductions only one time for each case. If a lien reduction is granted and not timely paid, the full amount of the lien will be reinstated, and the Applicant is barred from resubmitting an Application for lien reduction for a period of one year.

Applicant(s) Name: _____

Owner(s) Name (if different from Applicant): _____

Firm, Partnership or Business (if applicable): _____

Managing Member's Name (if applicable): _____

Applicant Telephone Number: _____ (Cell #) _____

Applicant E-Mail Address: _____

Designated Agent Name (if applicable): _____

Designated Agent Telephone Number: _____ (Cell #) _____

Designated Agent E-Mail Address: _____

Code Compliance Case Number(s): _____

Violation Address: _____

Current Owner/Applicant's Relationship or Affiliation with Entity/Person Named in Liens:

Number of Other Properties Located in the Town of Loxahatchee Groves owned by
Owner/Applicant/Managing Member: _____ **If any, attach list of property addresses**

Is this property the subject of foreclosure? Yes _____ No _____ **If yes, please attach Lis Pendens, FJ & CET**

Does this property have a contract for sale pending? Yes _____ No _____ **If yes, please attach the contract.**

Is the pending sale a short sale? Yes _____ No _____ **Approval from the bank must be attached.**

Anticipated Closing Date: _____

Was this property sold after the lien was recorded? Yes _____ No _____. If yes, was a title insurance policy issued at the time of the sale? Yes _____ No _____. **If yes, please attach the Title Insurance Policy.**

State reasons and be specific as to why a waiver/reduction should be granted, (attach an additional page/document if necessary). Below are the factors that the Special Magistrate will considered:

1. 1. The gravity of the violation;
2. 2. Any action(s) taken by the petitioner to correct the violation(s);
3. 3. Any previous violations committed by the petitioner;
4. 4. Any recommendation of the town administration;
5. 5. Whether the Petitioner or managing member of the Petitioner owns other properties in the town, and how many had other code cases or other liens;
6. 6. Whether the Petitioner owned or was the managing member or the property for which the lien was placed at the time the lien was placed;
7. 7. Any other factor which may show a hardship on the Petitioner requesting the release or which may provide a reasonable basis for the requested relief;
8. 8. The length of time between the ordered compliance date and the date the violation was eliminated;
9. 9. Any actual costs expended by the owner to cure the violation as provided by supporting documentation, including payment of town licensing or permit fees;
10. 10. Any other matter suggesting that the lien reduction is or is not equitable and/or in the best interests of the town.

State amount you are requesting to pay for each lien_____

(SIGNATURE ON FOLLOWING PAGE)

**Signature of Property Owner
If Individual:**

By: _____

Print Name: _____

State of _____

County of _____

On this ____ day of _____, 20__, the foregoing instrument was acknowledged before me, by means of ☐ physical presence or ☐ online notarization, by _____, an individual.

☐ Personally Known OR

☐ Produced Identification – Type of Identification Produced _____

Notary Public, State of Florida

My Commission Expires:

If Corporation:

By: _____

Print Name: _____

Title: _____

State of _____

County of _____

On this ____ day of _____, 20__, the foregoing instrument was acknowledged before me, by means of ☐ physical presence or ☐ online notarization, by _____, an individual.

☐ Personally Known OR

☐ Produced Identification – Type of Identification Produced _____

Notary Public, State of Florida

My Commission Expires:

PROPERTY LIEN ACTION APPLICATION FORM

This application form is intended to assist Town staff in identifying and fulfilling your request regarding liens on properties within the Town of Loxahatchee Groves.

INSTRUCTIONS:

1. Applicants must fill out and sign the form below.
2. One form is required for each address that requires action/services.
3. Applicants should bring this application into Town Hall, 155 F Road.
4. Payment of \$500 fee for each lien reduction request, and \$300 for each partial lien release is due at time of application.

Please check only one:

- ☐ **Lien Reduction** – Request reduction in Code Enforcement liens for properties in full compliance with Y codes
- ☐ **Lien Partial Release** - Request release of liens attached against parcels based upon violations on other properties by same owner

PROPERTY LOCATION: Street Address: _____

City: Loxahatchee Groves State: Florida Zip Code: _____

PROPERTY CONTROL NUMBER (PCN): All properties within City limits are assigned PCNs starting with 74
PCNs can be obtained at <https://www.pbcgov.org/papa/>.

- - - - -

Please provide any relevant information to enable us to assist you in the request:

APPLICANT (Owner not Agent) CONTACT SECTION

CONTACT NAME: _____ **EMAIL:** _____

COMPANY NAME: _____

CONTACT PHONE NUMBER: _____ **ALTERNATE PHONE #** _____

CONTACT MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

I (we) certify that the above statements submitted herewith are true to the best of my (our) knowledge and belief.

SIGNATURE OF APPLICANT: _____ **DATE:** _____



TOWN OF LOXAHATCHEE GROVES

**Code Compliance Department • 155 F Road • Loxahatchee Groves, Florida 33470
561-807-6670 • loxahatcheegrovesfl.gov**

LIEN REDUCTION DESIGNATION OF AGENT AFFIDAVIT

Property Address: _____

Parcel Control # _____

Any person appearing on your behalf, in your absence, must be designated as your agent on this form or such a person will not be entitled to speak at the hearing. If no one authorized appears on behalf of this request the hearing will be cancelled and will not be rescheduled for a period of 180 days unless the Special Magistrate determines that failure to appear was the direct result of circumstances beyond the Applicant/Agent's control.

_____ will attend the Special Magistrate Hearing for a Lien Reduction Request and has my permission to act as my agent before the Special Magistrate in all matters relating to above-referenced hearing regarding a parcel of real property that has a Town of Loxahatchee Groves lien attached.

Applicant's Name (printed) _____

Applicant's Signature: _____

Applicant's mailing Address _____

Applicant's Phone Number: _____

Designated Agent's Name _____

(SIGNATURE ON FOLLOWING PAGE)

If Individual:

By: _____

Print Name: _____

State of _____

County of _____

On this _____ day of _____, 20____, the foregoing Designation of Agent Form was acknowledged before me, by means of ☐ physical presence or ☐ online notarization, by _____, an individual.

☐ Personally Known OR

☐ Produced Identification – Type of Identification Produced _____

Notary Public, State of Florida My

My Commission Expires:

If Corporation:

By: _____

Print Name: _____

Title: _____

State of _____

County of _____

On this _____ day of _____, 20____, the foregoing Designation of Agent Form was acknowledged before me, by means of ☐ physical presence or ☐ online notarization, by _____, an individual.

☐ Personally Known OR

☐ Produced Identification – Type of Identification Produced _____

Notary Public, State of Florida My

My Commission Expires:

****THIS FORM MUST BE BROUGHT TO THE HEARING***