TOWN OF SURFSIDE

9293 Harding Avenue, Surfside, Florida 33154-3009
Phone: (305) 861-4863

Religious Land Use Relief Request Form

Request # _____ Date Completed Form Filed: _____

INSTRUCTIONS TO APPLICANT:

1. Complete all questions on this form.
2. Attach all required attachments.
3. No fee is due for filing this request or for appeal to the Town Commission.
4. If applicant is a religious assembly or institution, include a copy of any applicable governing documents.
5. If applicant is a religious assembly or institution, include a copy of business license receipt, if any has been issued or applied for.
6. For answers to questions concerning completion of this form, contact the Town Attorney at 305-861-4863.

I. RELIGIOUS ASSEMBLY OR INSTITUTION INFORMATION

Name of Applicant (or Applicant's Representative, if a religious assembly or institution)

Mailing Address

Telephone Number

Fax Number

Email Address

What property or use is affected by the land use regulation, etc., which forms the basis for this request?

What legal interest do you have in this property?

- ☐ a. If you are the owner, attach a copy of your deed.
- ☐ b. If you are a lessee, attach a copy of your lease.
- ☐ c. If you hold an option, attach a copy of the option agreement.
- ☐ d. Attach relevant documentation regarding any other interest you may have in the property.

II. RLUIPA AND RFRA RELIEF REQUEST

Provide specific answers to the following questions. Attach separate pages as necessary.

1. Are you requesting relief in advance of filing a RLUIPA or RFRA claim against the Town in state or federal court?

☐ Yes ☐ No

2. What land use regulation, rule, policy, procedure, practice or administrative decision is the basis for your claim?

3. What religious exercise or activity was affected by this land use regulation, policy, rule, practice, procedure or administrative decision?

4. Do you believe the implementation of a Town land use regulation (code, rule, policy, practice or procedure) has substantially burdened your ability to engage in religious exercise?

☐ Yes ☐ No

5. How has this land use regulation, etc. or its implementation substantially burdened your ability to engage in religious exercise or activity?

II. RLUIPA AND RFRA RELIEF REQUEST (continued)

6. If the substantial burden was imposed by an administrative decision, what is the date of the decision?

a. Who made the decision?

b. Was an administrative appeal filed?

7. Do you believe you or your religious assembly or institution has been treated on less than equal terms, in a discriminatory manner, excluded or unreasonably limited in comparison to another individual or nonreligious assembly or institution or in the practice of a religious exercise?

☐ Yes ☐ No

If so, how?

8. Indicate the specific relief you are requesting.

9. Indicate all contact you have had with the Town regarding your situation by identifying who you contacted, when this individual was contacted and a summary of the conversation or action resulting from the contact. Please list in chronological order.

III. APPLICANT ACKNOWLEDGEMENT

I/We, _____ do hereby swear/affirm that I/we am/are the owner(s), or holder of a real property interest in the property referenced in this form and that all necessary consents from any other interest holders in the property referenced in this form have been obtained prior to filing this Request for Relief under Sec. 90-99 of the Town of Surfside Code of Ordinances.

I/We certify that the above statements and the statements and any attached documents, including but not limited to construction or design plans, are true to the best of my/our knowledge and belief. Further, I/we understand that this form and its attachments become part of the official record of the Town. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the relief requested. I/We further acknowledge that additional information may be required by the Town during the processing of this form and I/we are willing to cooperate to provide such information or withdraw our Request for Relief as provided in Sec. 90-99 of the Code of Ordinances.

I/We further give consent to the Town to publish, copy or reproduce any copyrighted document submitted as an attachment to this form for any third party.

Signature(s) of Applicant(s) Date

Print Name(s)

IV. CONSENT STATEMENT

(Owner to complete if Applicant is not the fee simple title owner.)

I/We, the aforementioned owner(s), do hereby give consent to _____ to submit this application, prepare all required material and documents, attend and represent me/us at all meetings and public hearings pertaining to the request(s) and property I/we own described in the attached application. Furthermore, as owner(s) of the subject property, I/we hereby give consent to the party designated above to agree to all terms or conditions that may arise as part of the approval of this application for the proposed use.

Signature(s) of Owner(s) Date

Print Name(s)

** If there are multiple owners of the subject property, attach additional consent and notarized forms for each owner or interest holder. If the owner or interest holder is married, joinder of spouse is required.*

V. NOTARY

STATE OF FLORIDA

COUNTY OF

The foregoing instrument was acknowledged before me this day of , 20 by

☐ He/She is personally known to me ☐ or has produced

as identification, and did ☐ / did not ☐ take an oath.

Signature of Notary

My Commission Expires:

(Notary's Seal or Stamp)

(Name – must be typed, printed, or stamped)