

**REQUEST FOR CODE BOARD RECONSIDERATION**



Owner Name: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Violation Address(es): \_\_\_\_\_

Date of Request: \_\_\_\_\_

Case No(s) (if available): \_\_\_\_\_

Reason for Request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requestor's Name, Mailing Address, Email Address and Contact Number:  
\_\_\_\_\_

Requestor's Relationship with regards to interest in property cited (please check the applicable option):

- Owner
- Legal/Registered Agent
- Buyer with contract
- Relative

The following information will be filled out by City Staff:

Case No.: \_\_\_\_\_

**Date of Hearing:** \_\_\_\_\_

Fee paid in the form of: \_\_\_\_\_

**Please note:** Deadline to receive form and \$50.00 fee is **12:00 p.m. on Thursday**, two (2) weeks prior to scheduled date of hearing.

**Make payment payable to:** City of Lakeland

**Mail to:**

Code Enforcement  
Attn: Wrena Almon  
1104 Martin L. King, Jr. Ave.  
Lakeland, FL 33805  
(863) 834-8276