

Requirements for Restrictive Covenants

Restrictive Covenant Form is available here:

[Property Owner's Encroachment and Restrictive Covenant Agreement](#)

Restrictive Covenants

To ensure acceptance and timely processing by the City and the Miami-Dade Clerk of Courts, all restrictive covenant documents must comply with the following requirements:

- The restrictive covenant must be fully executed and either neatly printed or typewritten.
- Illegible documents will not be accepted by the City.
- Only the current restrictive covenant form, revised August 2024, will be accepted.
- Failure to comply with the instructions provided below may result in processing delays with the City or rejection of the agreement by the Miami-Dade Clerk of Courts.

Legal Description

The legal description must be **accurate** and include the correct **lot, block, plat book and page number**.

You can find this information here: [Property Search](#)

Preparer Information

The first page must include the preparer's name and address.

Example:

Prepared by: John Doe

123 Main Street

Coral Gables, FL 33134

JohnDoe@mail.com

Property Owner Signature(s)

- All property owner(s) listed on the property appraiser's website must sign the Restrictive Covenant.
- If the property is owned by a corporation or trust, an authorized officer (as may be listed on Sunbiz) must sign the Covenant.
- For corporations formed outside of the State of Florida, please submit state documentation showing the authorized officers.

Notarization

Confirm the notary block is **fully completed**, including:

- The notary signature and date are properly filled out.
- The name(s) of the owner(s) are clearly written and legible.
- Check either physical presence or online notarization.
- The notary stamp is included and legible.

Proof of Insurance Requirements

Proof of insurance must be provided.

- If the homeowner(s) have home insurance, please contact the homeowner's insurance agent to request a Certificate of Insurance.
- Request that the City of Coral Gables is listed as an additional insured.

For the certificate holder, use the following address:

**City of Coral Gables
Insurance Compliance
PO Box 100085-CE
Duluth, GA 30096**

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)	
Certificate Holder is shown as an additional insured solely with respect to general liability coverage as evidenced herein as required by written contract or agreement.	
CERTIFICATE HOLDER City of Coral Gables Insurance Compliance P.O. Box 10085-CE Duluth, GA 30096	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE	

Submission Process

Submit your Restrictive Covenant and Certificate of Insurance through **JustFOIA** at:

[Legal Forms and Resources | Coral Gables](#)

Submit Documents Electronically
Portal to submit legal documents electronically



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Portal to submit legal documents electronically.



After Submission

- You will receive your LFS reference number. Please keep this number for future reference.
- Your submission will be reviewed and sent to the City Attorney's Office for signature.
- For restrictive covenants, the required Certificate of Insurance will be sent to the Risk Manager for approval.
- Once the document is signed by the attorney and approved by the Risk Manager, you will receive an invoice through JustFOIA.

Fees for Processing and Recording

\$13.00 for the first page, **\$8.50** for each additional page.

Restrictive Covenants (*5 pages*): $\$13.00 + (4 \times \$8.50) = \$47.00$

We currently accept all major credit cards except American Express.

Final Steps

- Once payment is received, the document will be electronically filed with Miami-Dade Courts.
- The filing process may take up to six business days, please be patient.
- Once recorded, a copy of the document will be forwarded to you and Development Services, completing the process with our department.
