



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Request for: **Key to the City** **Proclamation** **Certificate**

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Date of Request: _____

Name of Requestor: _____

Organization: _____

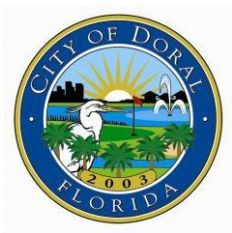
Address: _____

Phone: _____

E-Mail: _____

Name of Individual / Organization to be honored:

Title for Proclamation (*if applicable*):



CITY OF DORAL
KEY TO THE CITY, PROCLAMATION AND CERTIFICATES
REQUEST FORM
OFFICE OF THE MAYOR

Certificate Type:

Congratulatory

Anniversary

Grand Opening / Ribbon Cutting

Letter of Recognition

Reason for Recognition (Please attach 4 – 6 “whereas clauses” as draft text for a Proclamation, or justification for certificate):

Date, Time and Location of Recognition *(must be provided)*:

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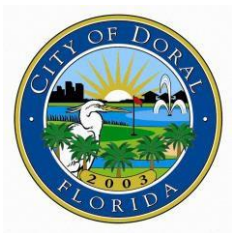
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REQUEST FORM
OFFICE OF THE CITY CLERK

Request for: Key to the City _____ Proclamation _____ Certificate _____
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Phone: _____

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Name of Individual / Organization to be honored:

Title for Proclamation (if applicable): _____



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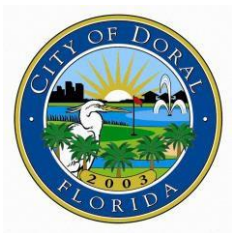
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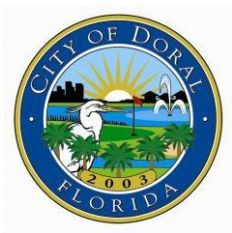
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Name of Individual / Organization to be honored:

Address of Individual to be honored *(if applicable)*:

Title for Proclamation *(if applicable)*:

Date to be Proclaimed *(if applicable)*:



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Certificate Type:

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Reason for Recognition: Please provide 4-6 "whereas clauses" as draft text for a Proclamation, or justification for certificate as you would like it to appear. Use a separate attachment if needed.

Background Information: Please provide detailed background information explaining the reason for the recognition for the individual or group, such as specific contributions to the Doral community, achievements in public service, accomplishments, accolades, leadership in local initiatives, volunteer efforts, or any other impactful actions that have positively influenced the community or brought distinction to the City of Doral. Use a separate attachment if needed.



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E-Mail: _____

Name of Individual / Organization to be honored:

Address of Individual to be honored *(if applicable)*:

Title for Proclamation *(if applicable)*:

Date to be Proclaimed *(if applicable)*:



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Certificate Type:

Congratulatory

Anniversary

Grand Opening / Ribbon Cutting

Reason for Recognition: Please provide 4-6 "whereas clauses" as draft text for a Proclamation, or justification for certificate as you would like it to appear. Use a separate attachment if needed.

Background Information: Please provide detailed background information explaining the reason for the recognition for the individual or group, such as specific contributions to the Doral community, achievements in public service, accomplishments, accolades, leadership in local initiatives, volunteer efforts, or any other impactful actions that have positively influenced the community or brought distinction to the City of Doral. Use a separate attachment if needed.



CITY OF DORAL
KEY TO THE CITY, PROCLAMATION AND CERTIFICATES
REQUEST FORM
OFFICE OF THE MAYOR

Date, Time and Location of Recognition (*must be provided*):

Document is to be:

- Presented at Council Meeting (5:00 p.m. Protocol): _____(date)
- Picked up by: _____
- Mailed to: _____

Note: Submission of a request for a Key to the City, Proclamation or Certificate does not guarantee issuance.

A minimum of five (5) business days is requested for processing, but may be waived by the Mayor's office.



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Request for: **Key to the City** **Proclamation** **Certificate**

The Key to the City is an honor bestowed on and approved only by the Mayor, upon esteemed residents, visitors, and others whom the Mayor wishes to honor. A key to the City is strictly honorary.

Proclamations are ceremonial documents issued and approved by the Mayor that recognize, celebrate, and honor extraordinary achievements. They may include but are not limited to the citizens of the City of Doral; residents of Miami-Dade County; certain organization's occasions of importance and significance; days that are noteworthy or historically significant; and special events.

Certificates of Recognition and/or Achievement which are inclusive of any other similar type of recognition, are honorary documents which can be requested by Councilmembers to be approved or denied only by the current Mayor, and that may be used to honor special events or individuals. These may include but are not limited to the citizens and businesses of the City of Doral, as well as certain organizations' occasions of importance and significance to the City of Doral.

Date of Request: _____

Name of Requestor: _____

Organization: _____

Address: _____

Phone: _____

E-Mail: _____

Name of Individual / Organization to be honored:

Address of Individual to be honored *(if applicable)*:

Title for Proclamation *(if applicable)*:

Date to be Proclaimed *(if applicable)*:



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Certificate Type:

Congratulatory

Anniversary

Grand Opening / Ribbon Cutting

Reason for Recognition: Please provide 4-6 "whereas clauses" as draft text for a Proclamation, or justification for certificate as you would like it to appear. Use a separate attachment if needed.

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CITY OF DORAL
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REQUEST FORM

OFFICE OF THE MAYOR

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Date of Request: _____

Name of Requestor: _____

Organization: _____

Address: _____

Phone: _____

E-Mail: _____

Name of Individual / Organization to be honored:

Address of Individual to be honored *(if applicable)*:

Title for Proclamation *(if applicable)*:

Date to be Proclaimed *(if applicable)*:



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Certificate Type:

Congratulatory

Anniversary

Grand Opening / Ribbon Cutting

Reason for Recognition: Please provide 4-6 "whereas clauses" as draft text for a Proclamation, or justification for certificate as you would like it to appear. Use a separate attachment if needed.

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CITY OF DORAL
KEY TO THE CITY, PROCLAMATION AND CERTIFICATES
REQUEST FORM
OFFICE OF THE MAYOR

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KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

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Date of Request: _____

Name of Requestor: _____

Organization: _____

Address: _____

Phone: _____

E-Mail: _____

Name of Individual / Organization to be honored:

Address of Individual to be honored (if applicable):

Title for Proclamation (if applicable):

Date to be Proclaimed (if applicable):



CITY OF DORAL

KEY TO THE CITY, PROCLAMATION AND CERTIFICATES

REQUEST FORM

OFFICE OF THE MAYOR

Certificate Type:

Congratulatory

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