

*Town of Fort White
P.O. Box 129
Fort White, FL 32028*

Property Owner Affidavit

Office Use Only

Application No. _____

Owner

Additional Owners

Appointed Agent(s)

Parcel Number(s) Section Township Range

Type of Request

I (we), the property owner(s) of the subject property, being duly sworn, depose and say the following:

1. That I am (we are) the owner(s) and record title holder(s) of the property described in the attached legal description;
2. That this property constitutes the property for which the above noted land use request is being made to the Town of Fort White;
3. That I (we), the undersigned, have appointed, and do appoint, the above noted person(s) as my (our) agent(s) to execute any agreement(s), and other documents necessary to effectuate such agreement(s) in the process of pursuing the aforementioned land use request;
4. That this affidavit has been executed to induce the Town of Fort White to consider and act on the subject request; and,
5. That I (we), the undersigned authority, hereby certify that the foregoing statements are true and correct.

Owner (signature)

Owner (signature)

STATE OF FLORIDA
COUNTY OF _____

SWORN AND SUBSCRIBED BEFORE ME
THIS _____ DAY OF _____, 20____

BY _____
WHO IS/ARE PERSONALLY KNOWN TO ME OR HAS/HAVE
PRODUCED _____
AS IDENTIFICATION.

(SEAL ABOVE)

Notary Public, Commission No. _____

(Name of Notary typed, printed, or stamped.)