

OWNERSHIP AFFIDAVIT & DESIGNATION OF AGENT

I. Ownership.

I,	, hereby attest to ownership of th	, hereby attest to ownership of the property described below:			
Location address:					
	for w	which this Application is submitted.			
The ownership, as recorded on the	deed, is in the name of:				
Please complete the appropriate sec	tion below: NOTE: The person signing under be listed below as an offi	section IV Acknowledgement, must cer or partner.			
Individual	Corporation/Limited Liability Company (LLC)	Partnership			
Government Entity	Provide Names of Officers/Members:	Provide Names of General Partners:			
	Dept. of State Registration No.:				
	Name/Address of Registered Agent:				

II. Designation of Owner's Agent. (Leave blank if not applicable)

As the owner of the above designated property and the applicant for which this affidavit is submitted, I wish to designate the below named party as my agent in all matters pertaining to the location address. In authorizing the agent named below to represent me, or my company, I attest that the application is made in good faith and that any information contained in the application is accurate and complete to the best of my knowledge and belief. (Note: Prior to the issuance of a building permit, the owner's agent must be the contractor listed on the permit application.)

Owner's Agent:	
Address:	
Contact Person:	Telephone No.:

III. Notice to Owner.

- A. All changes in Ownership & Applicant's Agent prior to issuance shall require new affidavit. If ownership changes the new owner assumes the obligations and the original applicant is released from responsibility for actions taken by others after the change in ownership.
- B. If the Owner intends the Designation of Applicant's Agent to be limited in any manner, please indicate the limitation below. (i.e., Limited to obtaining a certificate of concurrency for the parcel; limited to obtaining a land use compliance certificate; etc.)

Growth Management Department | Location: 435 N. Macomb Street | Mailing: 300 S. Adams Street Box B 28, Tallahassee, FL 32301 Land Use & Environmental Services Division | Phone: (850) 891-7001, option 4 | Fax: (850) 891-7184 Building Inspection Division | Phone: (850) 891-7001, option 2 | Fax: (850) 891-0948

IV. Acknowledgement.

• Individual	Corporation/LLC		• Partnership	
Signature	Print Corporation/LLC Nan	ne Prin	Print Partnership Name	
	By:	-		
Phone #:]	Print Name:		Its:	
Government Entity	hone #:		ne #:	
Print Government Name				
By:Signature Print Name: Title: Department:				
NOTARY INFORMATION (Please STATE OF COUNTY OF	use appropriate block.)			
• Individual	Corporation	/LLC	• Partnership	
Before me, thisday of, 20 By The foregoin instrument was acknowledged before me, by of physical presence or online notarization	g personally appea means	day of , 20, aredof corporation/	Before me, this day of, 20, personally appeared, partner/agent on behalf of, a partnership, the	
Government Entity Before me, thisday of 20, personally appearedas and on behalf of	LLC, on behalf LLC, The forego acknowledged b of physical preso online notarizati		foregoing instrument was acknowledged before me, by means of physical presence or online notarization	
executed the foregoing instrument was acknown before me, by means of physical presence online notarization	or			
	NOTARY STAMP:			
Signature of Notary	My commission expires:		_	
Print Notary Name	Identification Method:Personally known. Produced I.D. – Type:			

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