



TALLAHASSEE - LEON COUNTY PLANNING DEPARTMENT



APPLICANT'S AFFIDAVIT OF OWNERSHIP & DESIGNATION OF AGENT

I. Ownership.

I, \_\_\_\_\_, hereby attest to ownership of the property described below:

Parcel I.D. Number(s) \_\_\_\_\_

Location address: \_\_\_\_\_

for which this Application is submitted.

The ownership, as recorded on the deed, is in the name of:

Please complete the appropriate section below:

Individual

Corporation

Partnership

Provide Names of Officers:

Provide Names of General Partners:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dept. of State Registration No.:

\_\_\_\_\_

Name/Address of Registered Agent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. Designation of Applicant'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 above 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.

Applicant'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.) \_\_\_\_\_

\_\_\_\_\_

**IV. Acknowledgement.**

**Individual**

\_\_\_\_\_  
*Signature*  
Print  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone No.: \_\_\_\_\_

**Corporation**

\_\_\_\_\_  
Print Corporation Name  
By: \_\_\_\_\_  
*Signature*  
Print  
Name: \_\_\_\_\_  
Its: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone No.: \_\_\_\_\_

**Partnership**

\_\_\_\_\_  
Print Partnership Name  
By: \_\_\_\_\_  
*Signature*  
Print  
Name: \_\_\_\_\_  
Its: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone No. : \_\_\_\_\_

**Please use appropriate notary block.**

**STATE OF** \_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_

**Individual**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.

**Corporation**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_ **corporation**, on behalf of the corporation, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.

**Partnership**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_, partner/agent on behalf of \_\_\_\_\_, a **partnership**, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.

\_\_\_\_\_  
Signature of Notary

Print Name: \_\_\_\_\_  
Notary Public

(NOTARY STAMP)

My commission expires:

Personally known \_\_\_\_\_; or  
Produced identification \_\_\_\_\_.  
Type of identification produced:  
\_\_\_\_\_