

## OWNER'S AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF SARASOTA  
CITY OF NORTH PORT

BEFORE ME, the undersigned authority personally appeared \_\_\_\_\_,  
who being by me first duly sworn on oath, deposes and says:

1. That he/she is the fee-simple owner of the property legally described and attached to this application.
2. That he/she desires \_\_\_\_\_ approval to accomplish the above desired request, as stated on Page 1 of this Application.
3. That he/she has appointed \_\_\_\_\_ to act as Agent and/or Applicant in their behalf to accomplish the above.

\_\_\_\_\_  
(Owner's Signature)

STATE OF FLORIDA  
COUNTY OF SARASOTA  
CITY OF NORTH PORT

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_, who is personally known to me or who has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public (Signature)

(SEAL)

\_\_\_\_\_  
Print or type Notary Name

Commission (serial) Number \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**NOTE:**

**All applications shall be signed by the Owner(s) of the Property, or some person duly authorized by the Owner to sign. The authority authorizing such person other than the Owner to sign MUST be attached.**

## AGENT/APPLICANT'S AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF SARASOTA  
CITY OF NORTH PORT

BEFORE ME, the undersigned authority personally appeared \_\_\_\_\_.  
who being by me first duly sworn on oath, deposes and says:

1. That he/she Affirms and Certifies that he/she understands and will comply with all Ordinances, Regulations, and Provisions of the City of North Port, and that all statements and diagrams submitted herewith and attached hereto, are true and accurate to the best of their knowledge and belief, and further, that this application and attachments shall become part of the Official Records of the City of North Port, Florida, and are **Not Returnable**.
2. That he/she desires \_\_\_\_\_ approval for the use of property as proposed, for the property legally described on this Application.
3. That the submittal requirements for this Application, which are attached hereto, have been completed and attached hereto as part of this Application.

\_\_\_\_\_  
(Agent/Applicant's Signature)

STATE OF FLORIDA  
COUNTY OF SARASOTA  
CITY OF NORTH PORT

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification.

(SEAL)

\_\_\_\_\_  
Notary Public (Signature)

\_\_\_\_\_  
Print or type Notary Name

Commission (serial) Number \_\_\_\_\_

My Commission Expires: \_\_\_\_\_