

**Highlands County, Florida
Development Services Department Application**

OWNER'S AFFIDAVIT

I, _____, being first duly sworn, depose and say that I am the **OWNER** of the property described and which is the subject matter of the proposed hearing; that all the answers to the questions in this application, and all sketches, data and other supplementary matter attached to and made a part of the application, are honest and true to the best of my knowledge and belief. I understand this application must be completed and accurate before hearings can be advertised. I also understand that it is my obligation to comply with any other lawfully adopted and recorded deed restrictions or covenants that are more restrictive or impose a higher standard, and that any action of this Board does not supersede those requirements.

I authorize County staff to enter the property during the application process to complete its evaluation.

Please initial the appropriate line:

No contact is required. _____

An appointment is required before entering the property. _____

Print Name of Owner

Signature of Owner

Address: Number and Street (P.O. Box)

City and State (Zip Code)

**STATE OF FLORIDA
HIGHLANDS COUNTY**

The Foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization, this ____ day of _____, 20__, by _____ who is personally known by me ☐ or who has produced _____, as identification and who did take an oath:

Signature

Print Name

Notary Public, State of Florida
My Commission Expires: _____