



Planning Division
PO BOX 490, Station 11
Gainesville, FL 32627
Ph: 352-334-5023
Email: planning@gainesvillefl.gov

Property Owner Affidavit

Owner(s) of Record	
Name(s):	
Mailing Address:	
Phone:	Email:

Applicant/Project Coordinator	
Name:	Company:
Mailing Address:	
Phone:	E-mail:

Tax Parcel Number(s):
Property Address:
Acreage:
Requested Action:

I hereby certify that I am the owner of the subject property or a person having a legal or equitable interest therein. I authorize the above listed agent to act on my behalf for the purposes of this application.

Property Owner Signature: _____ **Date:** _____

Printed Name: _____

The foregoing affidavit is acknowledged before me this _____ day of _____, 20____, by _____ who is/are personally known to me, or who has/have produced _____ as identification.

State of _____

Signature of Notary Public _____