



Town of Longboat Key
Planning Zoning Building
501 Bay Isles Road
Longboat Key, FL 34228

941-316-1966
941-316-1970 FAX

Property Owner Affidavit

Authorized Agent

(I)(We) _____, as owner(s) of the property whose address and legal description is _____, hereby appoint _____ our _____ agent(s) to act on (my)(our) behalf for the request set forth below. (I)(we) understand that the agent may incur costs and expenses on our behalf in connection with (my)(our) request and agree to pay those fees and expenses in accordance with the Code of Ordinances of the Town of Longboat Key.

The nature of (my)(our) request is _____
(Variance, Zoning Determination, Special Exception, Permitting, etc.)

If this Affidavit is for an Association, please provide a copy of the Board Meeting minutes / authorization allowing the work to be completed.

Print or Type Property Owner's/Board Member

Signature of Property Owner/Board Member

Print or Type Property Owner's Name/Board Member

Signature of Property Owner/Board Member

Mailing Address of Property Owner(s) / Association: _____

Telephone Number of Property Owner(s)/Association

Fax Number of Property Owner(s)/ Association

Mailing Address of Agent(s): _____

Telephone Number of Agent(s)

Fax Number of Agent(s)

State of _____

County of _____

The foregoing instrument was acknowledged before me this _____, 20____, by _____ (name and title), who is personally known to me or who has produced _____ as identification.

Signature of Notary

(seal of Notary)

Print Name of Notary