

ATTESTATION OF COMPLIANCE WITH BROWARD COUNTY'S REOPENING GUIDELINES

1. I am the _____ [POSITION] of _____ [NAME OF ESTABLISHMENT], located at _____ [ADDRESS], and hereby affirm under penalty of perjury that I have reviewed Broward County's Emergency Order 20-21, as amended or superseded, and all applicable attachments thereto, which were developed and promulgated to limit the spread of COVID-19 and to allow certain establishments to operate safely during this global pandemic.

2. I understand the establishment mentioned above may only operate in compliance with Broward County's Emergency Orders, including Emergency Order 20-21, as amended or superseded, and all applicable attachments thereto.

3. I affirm that the establishment mentioned above has taken all necessary steps to comply with Broward County Emergency Orders.

4. I understand that future violations could result in additional closures, fines, and even imprisonment in accordance with Section 8-56 of the Broward County Code of Ordinances.

Under penalties of perjury, I declare that I have read the foregoing Attestation and that the facts stated in it are true.

Signature of owner or authorized agent

Print name of owner or authorized agent

Date

PLEASE EMAIL THIS SIGNED FORM TO reopening@broward.org

FOR CODE ENFORCEMENT USE ONLY:

City/Town Name: _____

Inspector: _____

Date and Time: _____

Case Number: _____

