



Application Number _____

AFFIDAVIT TO AUTHORIZE PETITIONER'S AGENT

I/We _____,
the property owner(s) of the property to be vacated in the subject of the Application, being duly sworn, depose(s)
and say(s):

1. That I/we am/are the owner(s) and record title holder(s) of the lands that are to be vacated and abandoned.
My/our folio number(s) is/are as follows:

_____.

2. That I/we do hereby appoint the following Agent to act on my/our behalf in the processing of the subject of
the Application to the Broward County Board of County Commissioners.

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Contact Person: _____

Name of Owner/Petitioner

Date

Name of Agent

Signature of Agent

NOTARY PUBLIC

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☐ physical presence | ☐ online notarization,
this _____ day of _____, 20_____, by _____,
of _____, on behalf of _____.

He/she ☐ is personally known to me | ☐ has produced _____ as identification.

Name of Notary Typed, Printed or Stamped

Signature of Notary Public – State of Florida

Notary Seal (or Title or Rank)

Serial Number (if applicable)



Application Number _____

NOTARY PUBLIC: Business/Government Entity Certification

This is to certify that I am the authorized acting agent of the business/government entity that is the owner/agent of the property described in this application and that all information supplied herein is true and correct to the best of my knowledge. By signing this application, owner/agent specifically agrees to allow access to described property at reasonable times by County personnel for the purpose of verification of information provided by authorized acting agent of the business/government entity.

Agent Signature for Business/Government Entity

Date

NOTARY PUBLIC

STATE OF FLORIDA COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☐ physical presence | ☐ online notarization, this _____ day of _____, 20_____, by _____, the _____, on behalf of _____, a _____.

He/she ☐ is personally known to me | ☐ has produced _____ as identification.

Name of Notary Typed, Printed or Stamped

Signature of Notary Public – State of Florida

Notary Seal (or Title or Rank)

Serial Number (if applicable)