## **BILL OF SALE**

Name (party of the First Part):	
Project Address or Location:	
Utility Connection Permit Number:	
KNOW ALL PERSONS BY THESE PRESENTS, that the party of the First Part for and in consideratic covenants contained in the above Utility Connection Permit between party of the First Part and County, Florida (party of the Second Part), address 2555 West Copans Road, Pompano Beach 33069 by these presents do/does grant, bargain, sell, transfer, and deliver unto the said Par Second Part, its successors and assigns, the following goods and chattels generally described by as more specifically shown on the project record drawings on file with the party of the Second I	Broward , Florida, ty of the elow and
KNOW ALL PERSONS BY THESE PRESENTS, that the party of the First Part for and in consideratic covenants contained in the above Utility Connection Permit between party of the First Part and County, Florida (party of the Second Part), address 2555 West Copans Road, Pompano Beach 33069 by these presents do/does grant, bargain, sell, transfer, and deliver unto the said Par Second Part, its successors and assigns, the following goods and chattels generally described be	Browar , Florida ty of th elow an

TO HAVE AND TO HOLD the same unto the said Party of the Second Part, its successors and assigns forever.

And they do for themselves and their successors and assigns, covenant to and with said Party of the Second Part, its successors and assigns, that said Party of the First Part is lawful owner of said goods and chattels; that they are free from all encumbrances; that he has good right to sell the same as aforesaid, and that he will warrant and defend the sale of said property, goods, and chattels hereby made, unto the said Party of the Second Part, its successors and assigns, against the lawful claims and demands of all persons whomsoever.

(signed on the following page)

installed at the above project address or location,

IN WITNESS WHEREOF party of the First officers thereunto duly authorized.	Part has caused its corporate name to be hereunto signed by its proper
Corporate Name:	
Signature:	
Type Name:	
Address:	
ATTEST (not required if witnessed below	)
Corporate Secretary Signature: Secretary)	(CORPORATE SEAL)  (not required if digitally signed by
Typed Name:	
WITNESSES (not required if attested by 9	Secretary above)
Witness One Signature:	Witness Two Signature:
Witness One Typed Name:	Witness Two Typed Name:
Witness One Address:	Witness Two Address:
<u>ACKNOWLEDGMENT</u>	
STATE OF FLORIDA	
COUNTY OF BROWARD	
this day of	ged before me, by means of ☐ physical presence or ☐ online notarization,
as identificatio	n. <u>Notary Public</u> :
	Signature:
State of Florida	Print Name:
My Commission Expires: Commission Number:	(Notary Seal) (not required if digitally signed by Notary)

WWS Bill of Sale Form Corporation Revised: February 6, 2025