

**FORM 8-R**

**AFFIDAVIT**

I, \_\_\_\_\_, being first duly sworn, depose and say that I am the OWNER, ATTORNEY, ATTORNEY-IN-FACT, AGENT or LESSEE of the property described herein and that all answers to the questions in this notice, and all sketches, data and other supplementary matter attached to and made a part of this notice are true, correct, and complete to the best of my knowledge and belief. I am authorized to sign this application by the owner, or owners.

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Signed

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Print Signature

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Title

**ACKNOWLEDGEMENT**

STATE OF FLORIDA            )  
  ) SS  
COUNTY OF HIGHLANDS    )

I hereby certify that before me personally appeared \_\_\_\_\_, to me well known to be of \_\_\_\_\_, who executed the foregoing instrument and who acknowledges that he/she executed the same freely and voluntarily.

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(SEAL)

\_\_\_\_\_  
(Signature of Notary Public - State of Florida)

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary

Public)

Personally Known \_\_\_\_ OR  
Produced Identification \_\_\_\_ Type of Identification Produced \_\_\_\_\_