



VACANT STRUCTURE AFFIDAVIT

Rev: 3 | Revision Date: 2/23/2024 | Print Date: 2/23/2024 | I.D. Number: VSA

VACANT STRUCTURE AFFIDAVIT

STATE OF FLORIDA)

BROWARD COUNTY)

BEFORE ME, personally appeared _____ (Owner or Qualifier Name)

located at _____ (Street Address)

who, first being duly sworn, deposes and states that the structure located at the above address is not occupied and in compliance with the Governor’s Executive Order 20-91, which shall take effect at 12:01 a.m. Saturday, April 11, 2020.*

*Non-essential alterations or remodeling will not be permitted. Permit applications for non-essential alterations or remodeling to existing structures will be accepted and fully reviewed with comments for corrections provided. However, the issuance of the permit to such work will be withheld until such time as the current declarations and/or additional or revised declarations are terminated, and COVID19 protocols are lifted.

OR

Owner's Signature

Owner's Signature

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization, this ___ day of ___, 202__, by _____ (Name and title of authorized officer) for _____ (Name of corporation), a _____ (whatever type of corporation).

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization, this ___ day of ___, 202__, by _____ (Name and title of authorized officer) for _____ (Name of corporation), a _____ (whatever type of corporation).

(Signature of Notary Public – State of Florida)

(Signature of Notary Public – State of Florida)

Print, Type or Stamp Commissioned Name of Notary Public)

Print, Type or Stamp Commissioned Name of Notary Public)

Personally Known ___ OR Produced Identification ___ Type of Identification Produced _____

Personally Known ___ OR Produced Identification ___ Type of Identification Produced _____