ACCESORY DWELLING UNIT AFFIDAVIT

Building, Planning and Zoning Department
Planning & Zoning Division
2200 Civic Center Place
Miramar, FL 33025
(954) 602-3200 | www.miramarfl.gov

STATEMENT OF ACKNOWLEDGEMENT

I, (PRINT FULL NAME) _____ homeowner/representative of the property located at _____ hereby attest or affirm that the proposed Accessory Dwelling Unit ("ADU") at the subject property will be in compliance with all applicable requirements of the City Code of Ordinances, the standards set forth under Section 405.1 of the City Land Development Code, the minimum housing standards of the Broward County Code of Ordinances, as well as the provisions of Section 163.31771, FS, as amended from time to time.

_____
SIGNATURE

_____
DATE

_____
BUILDING PERMIT NO.

NOTARIZATION

STATE OF _____/COUNTY OF _____

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization,
this ____ day of _____, _____(year), by _____ (name of person acknowledging)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification _____ Type of Identification Produced_____