



TOWN OF CUTLER BAY  
Department of Community Development  
Building Division  
(305) 234-4262

## SURVEY AFFIDAVIT

This form may be submitted in compliance with the provisions of Section 3-42 of the Land Development Regulations (Ordinance No. 21-06) for submittal of surveys older than 6-months but not exceeding 3-years.

**Affidavit:** To be executed by the owner.

If ownership is a corporation, Articles of Incorporation (full document filed with the Secretary of State) and a Board Resolution authorizing an individual or agent to sign on its behalf must be included. If ownership is an LLC (or similar), Articles of Organization (full document filed with the Secretary of State) and legal documentation authorizing an individual or agent to sign on its behalf must be included.

State of \_\_\_\_\_

County of \_\_\_\_\_

The undersigned Affiant, \_\_\_\_\_ (property owner), does hereby attest that the attached survey performed by \_\_\_\_\_ (surveyor's company), performed on \_\_\_\_\_ (date of survey), is an accurate representation of the existing conditions and locations of all structures and improvements on the property as of the date of this Affidavit.

The purpose of this Affidavit is to induce the Town of Cutler Bay to issue a building permit for the property without providing a survey less than six (6) months old. The Affiant, as property owner, further agrees to remove or obtain permits for any structures which now may exist on the property which are not permitted or which may violate zoning or building code regulations. The Affiant further understands that the existence of any such structures or improvements may affect final inspections as applicable to this or other permits.

\_\_\_\_\_  
(Owner/Affiant Signature)

\_\_\_\_\_ being first duly sworn, deposes and says that: They are the

☐ Owner ☐ Partner ☐ Officer ☐ Agent of \_\_\_\_\_ and that they, in the capacity indicated above, are authorized execute this affidavit for the purpose of this application with the Town of Cutler Bay. Sworn to (or affirmed) and subscribed before me **by means of** \_\_\_\_\_ **physical presence** or \_\_\_\_\_ **online notarization** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. They were personally known \_\_\_\_\_ or produced \_\_\_\_\_ as a form of identification.

\_\_\_\_\_  
Notary Public for the State of Florida

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Name typed printed, or stamped.