Statement of Ownership and Designation of Authorized Agent (Please Print or Type)

Who, being by me first duly sworn, on oath deposed and says:
1. That he/she is the fee simple title owner of the property described in the attached Leg
Description.
2. That he/she is requesting approval of a in the City
Stuart, FL.
3. That he/she has appointed to act as an authorize
agent on his/her behalf to accomplish the above project.
Name of Owner:
Signature of Owner: By: Name/Title
Street Address City, State, Zip Code
P.O. Box City, State, Zip Code
Telephone Number Fax Number
Email Address:
STATE OF FLORIDA, COUNTY OF
Sworn and subscribed before me by means of physical presence or online notarization, the
day of,By
Personally Known OR Produced Identification
Type of Identification Produced: Notary Public
My Commission expires: