

AFFIDAVIT IN LIEU OF CERTIFIED SITE PLAN

To Be Filed with Permit Application

STATE OF FLORIDA
COUNTY OF COLLIER

I, _____, do hereby affirm that the work performed under Permit Number _____, shall conform to the applicable setback(s), elevation, and easement requirement(s) established by Collier County and/or any other applicable agency.

I hereby agree that should any work performed under this permit result in a nonconformity with any setback(s), elevation, or easement requirement(s) established by Collier County and/or any other applicable agency, I will have no sustainable rebuttal against Collier County Government and will immediately remediate the nonconformity at no expense to Collier County Government.

(Select one):

OWNER-BUILDER

CONTRACTOR

DESIGN PROFESSIONAL

Signed: _____ Printed Name: _____

AFFIRMED AND SUBSCRIBED before me, the undersigned authority, on this _____ of _____, 20____, by _____,

(check one) who is personally known to me _____ or who provided identification _____.
Type of identification _____.

(Notary Signature) (Seal)

NOTARY PUBLIC – State of _____

My Commission Expires: _____