## CITY OF TARPON SPRINGS, FLORIDA License to Encroach, Statement of No Objection or Declaration of Restrictive Covenants Application

Return to: Planning & Zoning Department 324 E. Pine Street Tarpon Springs, FL 34689 (727) 942-5611

(Please type or print clearly)

Property Owner(s)						
Name		Email				
Address						
City		State			Zip	
Phone Fax				Cellular		
Applicant						
Name	Email					
Address						
City		State			Zip	
Phone	Fax	C		Cellular		
Agent (if applicable)						
Name		Email				
Address						
City		State			Zip	
Phone	Fax		Cellular			
General Information						
Property Location or Address						
Legal Description (attach additional sheets as necessary)						
Tax Parcel Number(s)						
Proposed Agreement Duration		Present Designations of Property				
		Land Use Category			Zoning District	
Additional Information Required:  □ Completed original application v	with digital co	opies of all applic	ation do	ocum	ents	
☐ Application fees:						
2. Statement of No Objection \$2		250.00 or actual cost, whichever is greater 250.00 or actual cost, whichever is greater 250.00 or actual cost, whichever is greater				
☐ Proof of ownership or legal interes	t (warranty de	ed, title certification	n, contra	act, po	ower of attorney, etc.).	
☐ An accurate boundary survey sign description, easements, encroachme	ned and seale	ed by a registered I	and surv	veyor	containing the complete legal	
☐ Mailing labels for public notices an calculate postage charges when a co	d applicable p	oostage charges. (C	City staff	•	•	

## CITY OF TARPON SPRINGS, FLORIDA License to Encroach, Statement of No Objection or Declaration of Restrictive Covenants Application

## **AFFIDAVIT**

I (we), the undersigned, certify ownership of the property within this application, that said ownership
has been fully divulged, whether such ownership by contingent or absolute, and that the name of all
parties to an existing contract for sale or any options are filed with this application.
I (we) certify that is (are) duly designated as the agent(s) for the
owner, that the agent(s) is (are) authorized to provide subject matter on the application contained
herein, whether verbal or written, and appear at any public hearing(s) involving this petition.
I (we) assent to the City's Comprehensive Plan as it applies to the property. Further, it is understood that this application must be complete and accurate and the appropriate fee paid prior to processing.
Date: Title Holder/Property Owner:
STATE OF FLORIDA )
COUNTY OF PINELLAS )
The foregoing instrument was acknowledged before me this day of, A.D., 20
by, who is personally known to me or who has produced PROPERTY OWNER NAME PRINTED
as identification and who did (did not) take an oath.
NOTARY PUBLIC
Name:
Signature:
Stamp:

Rev. 6/18/2019 Page 2