



Property of Proposed Improvement

Street Address

Folio #

Subdivision Name (if applicable)

Block

Lot

I, the undersigned, do attest the placement of fill shall conform to the following:

1. Fill shall be restricted to the septic drainfield and the building foundation only with the exception of minor **foundation grading** not to exceed 6 feet from the building footprint and,
2. **Foundation grading** shall be placed no nearer to the side property boundary than 3 feet with the slope from the structure not to exceed 4: 1.

I understand that any misrepresentation by me on this Affidavit voids any permit or exemption that I might attain based upon this Affidavit and will lead to appropriate legal action against me.

Owner or Authorized Agent (Please Print)

Signature of Owner or Authorized Agent

Date

INDIVIDUAL ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this

____ day of _____, _____, by _____.
(day) (month) (year) (name of person acknowledging)

Personally Known OR Produced Identification

Type of Identification Produced

(Signature of Notary Public - State of Florida)

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

(Notary Seal)

(Commission Number)

(Expiration Date)