

## Affidavit to Complete Reclamation - Corporate (for multiple owners, each owner must complete a separate affidavit)

١,		, being first duly sy	worn, state and affiri	m:	
′ –	["Authorized Representative"]		,		
1.	I affirm that I am the		_and the duly author	rized representative of	
	[business name]	(the "Permit Hold	er"), and that I posse	ess the legal authority to	make this
	Affidavit on behalf of myself and	the Permit Holder.			
2.	The Permit Holder is the owner of the property located at				
	(the "Property").			[address and folio]	
3.	The Property is subject to the cor (the "Permit")	nditions of the Land E	excavation Operating	; Permit #	
4.	I further acknowledge and affirm that the Permit Holder will complete the reclamation of the Property within the time frame and in the manner required by the Hillsborough County-approved reclamation plans for the Property, by the Permit, and by Hillsborough County Land Development Code, Ord. 92-05, as amended.				
r: ~		da., af	20		
Sig	ned this(day)	(n	, <b>ZU</b> _ nonth) (	· (vear)	
				Name of Permit Holder (Orga	nization Name)
				Signature of Authorized Repr	esentative
				Printed Name of Authorized I	Representative
AC	KNOWLEDGEMENT (CORPORA	TE)			
ST/	ATE OF				
CO	UNTY OF				
The	e foregoing instrument was acknowled	dged before me by mea	ns of $\square$ physical pres	ence or $\square$ online notariza	ation, this
	day of		, bv		
(da		(year)	(nam	e of person acknowledging)	·
	of		_, on behalf of the		He and/or she
	(title)	(name of entity)		(type of business entity)	
is [	personally known to me or has	produced identificatio	n	and did did	did not take an oath
			(type of identifica	ition)	
		-	(Signature o	of Notary Public - State of Flor	 ida)
			(10 111 1	,	,
		-	(Print, Type, or S	tamp Commissioned Name of	f Notary Public)
				•	•
	(Notary Seal)		(Commission Number)		Expiration Date)
	( , ,		,	\-	-   -

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