

## St. Johns County Florida Board of County Commissioners Affidavit for Certificate for a Home-based Business

As a resident of the County of St. Johns, within the State of Florida, I HAVE READ AND ACKNOWLEDGE THAT:

- 1. It is the sole responsibility of the affiant to obtain, read, and abide by all applicable requirements and provisions of Section 559.955(3), Florida Statutes, as they apply to operating a **Home-Based Business** in the County of St. Johns, within the State of Florida.
- 2. I, the affiant, having been presented with the aforementioned conditions by the appropriate County personnel, understand and agree to these terms. Additionally, County approval does not supersede any private deed restrictions or regulations by your Homeowner Association.
- 3. I understand that the failure to adhere to the statutory requirements or any applicable local regulations may result in code enforcement action against me upon investigation of a valid complaint.
- 4. Under penalties of perjury, I declare that I have read the foregoing statements and that the facts stated above are true.

Affiant Signature: .			
Print name:			
Date Signed:			
Address of Home-ba	sed Business:		

STATE OF FLORIDA COUNTY OF			
The foregoing instrument was ackn online notarization, this	owledged before me b	y means of □ physical presence , 20	or 🗆
Notary Public, State of Florida Name:			
My Commission Expires:			
My Commission Number is:			
Personally KnownOR Produce	ed Identification		
Type of Identification Produced			