

Homeowner Authorization Form

**City of Plantation
Development Services Building
Planning, Zoning, and Economic
Development Department**

Second Floor
401 NW 70 Terrace, Plantation, FL 33317



Residential Address
Local Business Tax Division
(954) 414-7852
(954) 797-2239
(954) 797-2256

Main Line: (954) 797-2225

LBTR@Plantation.org

I certify that I am the homeowner or homeowner's representative of the following residential property: _____, Plantation, FL 333_____

The residential property identified above has been leased to or shared with _____, identified as Home Occupant from this point forward.

I understand that the Home Occupant will be conducting a business utilizing the above residential address. In addition, I understand that the Home Occupant should remain in compliance with all applicable Sections of the Code of Ordinances of the City of Plantation, including, but not limited to, the following: Chapter 14, Article II, Secs. 14-16 through Sec. 14-40 and Sec. 27-301. I further understand that any violations incurred and not corrected by the Home Occupant, are ultimately my responsibility, regardless of any lease conditions or agreements with said Home Occupant.

Homeowner or Representative's Signature

Telephone Number

Printed Name

Email

Title

Mailing Address

Date

Mailing Address (City, State, Zip)

State of _____
County of _____

NOTARY STATEMENT

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 20____, by _____, an individual or as _____ on behalf of _____ a corporation, limited liability company, or partnership formed in _____, who is personally known to me or has produced a _____ as identification.

Signature of Notary Public

Seal