

Approved as to form:  
Leon County Attorney's Office  
301 South Monroe St., Suite 217  
Tallahassee, FL 32303



Leon County  
Board of County Commissioners

Department of Development Support &  
Environmental Management  
435 North Macomb St., 2<sup>nd</sup> Floor  
Tallahassee, FL 32301

Phone#: (850) 606-1300  
Fax#: (850) 606-1301

## Sign Posting Affidavit

This Sign Posting Affidavit shall be signed and dated in the presence of a Notary Public and uploaded, with attached photographs of the sign(s) posted on the property, to the project's associated ProjectDox file within 7 calendar days of an application being submitted for review. Property that is subject to site and development review shall meet Development Services' Sign Posting Specifications.

### SIGN POSTING CERTIFICATION

I, \_\_\_\_\_, hereby attest that, as required by Chapter 10, Leon County Code of Laws, and as demonstrated by the attached photograph(s), which was taken at \_\_\_\_\_ a.m / p.m. on (date) \_\_\_\_\_, by me or under my direct supervision by \_\_\_\_\_, a sign(s) has been prominently displayed that is clearly visible and centrally located along the primary street(s) immediately adjacent to the property for the following project. I also understand that the sign(s) shall remain in place as posted until all applicable approvals for the project are obtained, and will be removed within 10 days after completion of all applicable approvals.

PROJECT NAME :

PROJECT #:

PARCEL ID #:

APPLICANT OR AGENT SIGNATURE:

APPLICANT EMAIL:

APPLICANT PHONE NO.:

STREET(S) POSTED:

### NOTARY PUBLIC – CROSS THROUGH NOTARY SECTIONS NOT USED

STATE OF :

COUNTY OF :

For an individual or individuals acting in his, her or their own right; or

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, by \_\_\_\_\_,  
(name of person acknowledging)  
who is personally known to me or who has produced \_\_\_\_\_ as identification.  
(type of identification produced)

For Corporation or Governmental Entity; or

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,  
by \_\_\_\_\_, as \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_  
(name of officer or agent, title of officer or agent) (office held) (name of corporation) (state)  
corporation, on behalf of the corporation. He/she is personally known to me or has produced \_\_\_\_\_ as identification.  
(type of identification produced)

For Partnership

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ by \_\_\_\_\_,  
(name of acknowledging partner)  
partner on behalf of \_\_\_\_\_, a partnership.  
(name of partnership)  
He/she is personally known to me, or has produced \_\_\_\_\_ as identification.  
(type of identification produced)

NOTARY  
SEAL

Signature of Notary

Print, Type or Stamp Commissioned Name of Notary

Title or Rank

Serial Number, If Any