

# TOWN OF OCEAN RIDGE

6450 N. Ocean Blvd., Ocean Ridge, FL 33435  
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www.oceanridgeflorida.com



## Affidavit to Appoint Agent

Please check one of the following:

- |  |  |
|--|--|
| <input type="checkbox"/> Annexation                            | <input type="checkbox"/> Plat or Re-Plat   |
| <input type="checkbox"/> Building Permit (Revisions, etc.)     | <input type="checkbox"/> Re-Zoning         |
| <input type="checkbox"/> Comprehensive Plan Amendment          | <input type="checkbox"/> Site Plan Review  |
| <input type="checkbox"/> Concept Plan Review                   | <input type="checkbox"/> Special Exception |
| <input type="checkbox"/> Construction East of the CCCL         | <input type="checkbox"/> Variance          |
| <input type="checkbox"/> PRD Amendment                         | <input type="checkbox"/> Other _____       |
| <input type="checkbox"/> Planned Residential Development (PRD) |  |

1. He/She is fee simple owner of the following described property, to wit: (Provide Property Address and Legal Description)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. He/She desires to submit a \_\_\_\_\_ application to the Town of Ocean Ridge, Florida.

3. He/She has appointed \_\_\_\_\_ to act as agent in his/her behalf to accomplish the above.

4. He/She affirms and certifies that he/she understands and agrees to comply with the Town of Ocean Ridge Land Development Code. He/She further certifies that the statements, plans and all information submitted as a part of this application are true and correct to the best of his/her knowledge. Further, he/she understand that this application and attachments become part of the Official Records of the Town of Ocean Ridge, Florida and are not returnable.

State of Florida  
County of Palm Beach

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization on this day \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Property Owner                      Property Owner Printed Name

\_\_\_\_\_  
Notary Public Signature                      Notary Printed Name

My Commission Expires \_\_\_\_\_ (SEAL)

Personally Known: \_\_\_\_\_ or ID: \_\_\_\_\_ (Type of Identification Provided)