



AFFADAVIT OF ADMINISTRATION USE ONLY

I, the undersigned, do hereby agree to utilize this business location strictly as an administrative office. Such address shall be allowed to serve as an address for licensing purposes and for private management of business matters. No equipment or materials shall be stored on premises.

I further acknowledge that any departure from the above statement shall be grounds for revocation of the applicable local business tax.

I further acknowledge the local business tax receipt issued must be renewed each year prior to October 1st.

I do hereby authorize the City of Destin and its representatives the right to conduct reasonable inspection of premises to ensure compliance with the applicable conditions. I further acknowledge that if a nuisance complaint is received, and if noncompliance is determined, I understand that I shall have thirty (30) days in which to comply or cease operation at the permitted site.

Dated this _____ of _____, 20__.

Signature

Name (Print)

Address

The foregoing instrument was acknowledged before me this _____ of _____, 20__ by, _____ who has produced _____ as identification or is personally known by me and who did (did not) take an oath.
State of Florida Notary Stamp:

Approved for administrative use: _____
Community Development Staff

City of Destin
Building Division
4200 Indian Bayou Trail
Destin, Florida 32541