4436 OLD SPANISH TRAIL
CARYVILLE, FL 32427-2159
850-548-5571
ADMIN@CARYVILLEFL.COM

RENTER'S AFFIDAVIT

To be completed by the Renter

I, _____ do hereby affirm that I am the legal occupant of the following described property, _____.

I hereby authorize the utilities to be turned on and understand that I am fully responsible for all bills incurred for the use of said utilities.

I further understand that I must abide by all provisions of City Ordinances that apply to the utilities being used. Copies of the City Ordinances are available at the City Hall or online at www.cityofchipley.com. Any violation of any utility ordinance may cause all utilities to be disconnected.

Additional Comments: _____

_____

Tenant Signature: _____ Date: _____

To be completed by the Owner/Landlord

I, _____ do hereby attest that my property, located at _____ has been rented to the following tenant(s): _____ as of _____.

Last Occupant Name: _____

Date Services to be Connected: _____

Services to be Connected: Water ____ Sewer ____ Gas ____ Garbage____

Is this a residence? _____ Is this a business? _____

If a business, do you have a backflow preventer installed? _____

Owner/Landlord Mailing Address: _____

_____

_____

Additional Comments: _____

_____

Owner/Landlord Signature: _____ Date: _____

City Representative Signature: _____ Date: _____