

## **CITY OF BELVEDERE**

450 San Rafael Avenue • Belvedere, CA 94920-2336 Tel: 415/435-3838 • Fax: 415/435-0430 • www.cityofbelvedere.org

## AFFIDAVIT REGARDING OWNER OCCUPANCE AFTER LOT SPLIT

Owner	r-Occupant Name(s)		
Proper	rty Address(es)		
Assessor's Parcel Numbers(s)			
1.	I am the owner of the real property identified above.		
2.	On, I, or my authorized agent, submitted an application to the City of		
Belvedere for a parcel map subdividing the Property pursuant to the procedure			
	in California Government Code Section 66411.7 and Belvedere Municipal Code Chapter		
	18.27.		
3. I intend to occupy one of the housing units as my principal residence for no less than three			
	years from the date the City of Belvedere approves my application to split my lot pursuant		
	to Government Code section 66411.7.		
I decla	are, under penalty of perjury under the laws of the State of California that the foregoing is		
true a	nd correct and this affidavit was executed on the of, 20, at		
	, California.		
	Signature		
	Printed Name		

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the veracity, accuracy, or validity of that document.

State of California			
County of			
On [DATE], before me, [NOTARY NAME], Notary Public, personally appeared [APPLICANT NAME], who provide to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subjected to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) executed the instrument.			
I certify, under penalty of perjury under the laws of the state of California, that the foregoing			
paragraph is true and correct.  Witness my hand and official seal.			
Signature			