



City of
Aventura
Government Center
19200 West Country Club Drive
Aventura, Florida 33180

APPLICANT REPRESENTATIVE AFFIDAVIT
AND
BUSINESS RELATIONSHIP AFFIDAVIT

INFORMATION AND INSTRUCTION SHEET

The Applicant Representative Affidavit and Business Relationship Affidavit are required pursuant to Section 31-71 of the City's Land Development Regulations. Section 31-71(b)(2) is attached.

I. Applicant Representative Affidavit

One Applicant Representative Affidavit is required for each development permit. Submit only one Applicant Representative Affidavit per application listing all representatives, not a separate affidavit for each representative.

This affidavit must list all persons representing the individual or entity applying for the development permit, including, but not limited to, all attorneys, architects, landscape architects, engineers and lobbyists. This affidavit must be signed by an authorized representative of the individual or entity applying for the development permit and the owner of the property (if different than the applicant). The signature of each representative is not required on this affidavit, only the signature of the individual or entity applying for the development permit and the owner of the property (if different than the applicant).

II. Business Relationship Affidavit

A separate Business Relationship Affidavit is required for each representative listed on the Applicant Representative Affidavit. A Business Relationship Affidavit is also required for the applicant and the property owner (if different than the applicant). This form consists of three pages. On Page 1, state whether or not a relationship exists by checking the appropriate box. The applicant and/or the property owner signs the affidavit at the bottom of Page 1. For all other representatives, sign on Page 2. On Page 3, the signature is sworn by a Notary Public of the State of Florida.

The Business Relationship Affidavit requires the individual or entity providing the affidavit to disclose whether it has any business relationships with any member of the City Commission or any City Advisory Board and the nature of the business relationship. The types of relationship to be disclosed are listed on Page 1 of the Affidavit as 2.i to vi.

Please be sure to properly complete and date all forms submitted.

PHONE: 305-466-8940 / FAX: 305-466-3277
www.cityofaventura.com



APPLICANT REPRESENTATIVE AFFIDAVIT

Pursuant to Section 31-71(b)(2)(i) of the City of Aventura Land Development Code, this Applicant Representative Affidavit is hereby made and submitted. The undersigned authorized representative of the individual or entity applying for the Development Permit, which is identified in the accompanying application, and the owner of the property subject to the application (if different) hereby lists and identifies all persons representing the individual or entity applying for the Development Permit in connection with the application, as follows:

Name

Relationship (i.e. Attorneys, Architects, Landscape Architects, Engineers, Lobbyists, Etc.)

_____	_____
_____	_____
_____	_____
_____	_____

(Attach Additional Sheets If Necessary)

NOTICE: ANY STATEMENT OR REPRESENTATION MADE BY ANY PERSON LISTED ON THE APPLICANT REPRESENTATIVE AFFIDAVIT SHALL BE BINDING UPON THE INDIVIDUAL OR ENTITY APPLYING FOR THE DEVELOPMENT PERMIT AND THE OWNER OF THE SUBJECT PROPERTY. APPLICANTS AND AFFIANTS ARE ADVISED TO TIMELY SUPPLEMENT THIS AFFIDAVIT PURSUANT TO SEC. 31-71(B)(2)(IV) OF THE CITY'S LAND DEVELOPMENT REGULATIONS IN THE CITY CODE, IN THE EVENT THAT PRIOR TO CONSIDERATION OF THE APPLICATION BY THE CITY BOARD OR COMMISSION, THE INFORMATION PROVIDED IN THE AFFIDAVIT BECOMES INCORRECT OR INCOMPLETE.

WITNESS MY HAND THIS ____ DAY OF _____, 200_.

AUTHORIZED REPRESENTATIVE OF APPLICANT:

OWNER

By: _____

By: _____

(Signature)

(Signature)

Name: _____

Name: _____

(Print)

(Print)

Title: _____

Title: _____

Address: _____

Address: _____

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

Before me the undersigned authority personally appeared _____ as the authorized representative of the Applicant and/or the owner of the property subject to the application, who being first by me duly sworn, did swear or affirm that he/she executed this Affidavit for the purposes stated therein and that it is true and correct.

SWORN TO AND SUBSCRIBED BEFORE ME this __ day of _____, 200_.

AFFIANT

Notary Public State of Florida At Large
Printed Name of Notary _____
My commission expires: _____



BUSINESS RELATIONSHIP AFFIDAVIT*

This Affidavit is made pursuant to Section 31-71(b)(2)(ii) of the City of Aventura Land Development Code. The undersigned Affiant hereby discloses that: (mark with "x" applicable portions only)

1. Affiant does not have a Business Relationship with any member of the City Commission or any City Advisory Board to which the application will be presented.
2. Affiant hereby discloses that it does have a Business Relationship with a member of the City Commission or a City Advisory Board to which the application will be presented, as follows:

_____ (List name of Commissioner or Advisory Board Member) who serves on the
_____ (List City Commission or City Advisory Board upon which member serves).

The nature of the Business Relationship is as follows:

- i. Member of City Commission or Board holds an ownership interest in excess of 1% of total assets or capital stock of Applicant or Representative;
- ii. Member of City Commission or Board is a partner, co-shareholder (as to shares of a corporation which are not listed on any national or regional stock exchange) or joint venturer with the Applicant or Representative in any business venture;
- iii. The Applicant or Representative is a Client of a member of the City Commission or Board or a Client of another professional working from the same office or for the same employer as the member of the City Commission or Board;
- iv. A City Commissioner or Board member is a Client of the Applicant or Representative;
- v. The Applicant or Representative is a Customer of the member of the City Commission or Board (or of his or her employer) and transacts more than \$10,000.00 of the business of the member of the City Commission or Board (or his or her employer) in a given calendar year;
- vi. The member of the City Commission or Board is a Customer of the Applicant or Representative and transacts more than \$25,000.00 of the business of the Applicant or Representative in a given calendar year.

WITNESS MY HAND THIS ____ DAY OF _____, 200_.

APPLICANT:

By: _____ (Signature)

Name: _____ (Print)

Title: _____ (Print)

WITNESS MY HAND THIS ____ DAY OF _____, 200_.

PROPERTY OWNER:

By: _____ (Signature)

Name: _____ (Print)

Title: _____ (Print)

*The terms "Business Relationship," "Client," "Customer," "Applicant," "Representative" and "Interested Person" are defined in Section 2-395 of the Aventura City Code.

WITNESS MY HAND THIS _____ DAY OF _____, 200_.

REPRESENTATIVE: (Listed on Business Relationship Affidavit)

By: _____ (Signature)

Name: _____ (Print)

Title: _____ (Print)

By: _____ (Signature)

Name: _____ (Print)

Title: _____ (Print)

By: _____ (Signature)

Name: _____ (Print)

Title: _____ (Print)

By: _____ (Signature)

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Title: _____ (Print)

By: _____ (Signature)

Title: _____ (Print)

Title: _____ (Print)

NOTE: 1) Use duplicate sheets if disclosure information for Representative varies

2) Applicants and Affiants are advised to timely supplement this Affidavit pursuant to Sec. 31-71(b)(2)(iv) of the City's Land Development Regulations in the City Code, in the event that prior to consideration of the application by the City Board or Commission, the information provided in the Affidavit becomes incorrect or incomplete.

NOTARIZATION PROVISION

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

Before me, the undersigned authority, personally appeared _____ the Affiant, who being first by me duly sworn, did swear or affirm that he/she executed this Affidavit for the purposes stated therein and that it is true and correct.

AFFIANT

SWORN TO AND SUBSCRIBED before me this ____ day of _____, 200_.

Notary Public State of Florida At Large

Printed Name of Notary
My commission expires: _____

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

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AFFIANT

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AFFIANT

SWORN TO AND SUBSCRIBED before me this ____ day of _____, 200_.

Notary Public State of Florida At Large

Printed Name of Notary
My commission expires: _____