

BRADFORD COUNTY FAMILY LOT APPLICATION

The undersigned hereby applies for a Family Lot Waiver as provided by the Bradford County Land Development Regulations Section 14.9

Property Owner's Name: _____

Address: _____

Parent Tract Parcel Number: _____

Phone Number: _____ Acreage: _____

Applicant's Name: _____

Address: _____

Phone Number: _____

Relation to property owner:

| | | | |
|----------------|-------|---------------|-------|
| Grandparent | _____ | Child | _____ |
| Parent | _____ | Stepchild | _____ |
| Stepparent | _____ | Adopted Child | _____ |
| Adopted Parent | _____ | Grandchild | _____ |
| Brother | _____ | Sister | _____ |

Land Use Classification: _____ Agricultural

_____ Environmental Sensitive

Number of dwellings currently on Parent Tract Parcel: _____

Number of times Parent Parcel has been split under Family provisions: _____

ATTACH THE FOLLOWING ITEMS TO THE FAMILY LOT APPLICATION

- * Proof of ownership in the form of a deed from the property owner
- * Personal identification (driver's license) of both the property owner and the applicant
- * Proof of relationship to property owner consistion of one (1) of the original documents below:
 - * Birth Certificates
 - * Adoption Records
 - * Marriage Certificates
- * Affidavit of intention to occupy family lot residence for at least five (5) years.
- * Map of access to property showing ingress/egress to parent tract and the proposed family lot.
- * FEMA Flood Zone Report (obtain from Building & Zoning Department).

Signature of Application

Date

FOR OFFICE USE ONLY DO NOT WRITE BELOW THIS LINE

Date Received: _____

Fee Amount: _____ ReceiptNo: _____

AUTHORIZATION TO PROCEED

Approved: _____ Denied: _____

Application Deadline Date: _____
After 90 Days Application will become Null and Void

Complete: _____ Void: _____

Signature of Zoning Director or Designee

Date

**AFFIDAVIT FOR THE IMMEDIATE FAMILY MEMBER SEEKING APPROVAL FOR A FAMILY
HOMESTEAD EXCEPTION**

STATE OF FLORIDA
COUNTY OF BRADFORD

PARCEL NO: _____

SECTION _____ TOWNSHIP _____ RANGE _____

BEFORE ME personally appeared _____
who after being duly sworn, and upon personal knowledge, deposes and states:

1. Applicant intends to build a residence or place a mobile home on the property described by the attached legal description, incorporated herein, and promises to occupy the residence, if a Family Homestead Exception is granted applicant must retain ownership of said parcel for at least five (5) years from the date of issuance of Certificate of Occupancy.
2. Applicant understands that only one Family Homestead Exception may be granted per immediate family members.
3. Applicant understands that he/she is the only person who shall be allowed to obtain a building permit for a residential structure on the lot on which a Family Homestead Exception is granted.
4. Applicant must record the original Affidavit along with the Warranty Deed at the Clerk of Courts.
5. Applicant must provide the following documents to our office within Ninety (90) Days of Authorization to proceed or application will become Null and Void.

- * Recorded Warranty Deed
- * Recorded Affidavit
- * Legal Survey

Signature of Applicant

Date

SWORN to and subscribed before me and being personally known to me or having produced a valid driver's license or Identification Card.

_____ day of _____ 20 _____

Notary Public State of Florida

My Commission Expires: