CITY OF HOLLY HILL APPLICATION & AFFIDAVIT

Ownership Disclosure Form

The owner of the real prop	perty asso	ociated with this	s application is a (check o	ne)
□Individual		☐ Partnership			
☐ Limited Liability Comp	pany	☐ Land Trust			
☐ Corporation		☐ Other(describe)			
List all natural persons wh		•	erest in the prope	rty, whi	ich is the subject
NAME		ADDRESS		PHONE NUMBER	
For each corporation, list t	-		for more space.)	r, tho n	ame and address
of each director of the cor					
owns two percent (2%) or			•		
disclosed if a corporation's			y on any nationa	I stock	exchange.
NAME	TITLE OR OFFICE		ADDRESS		% OF INTEREST
	(Use a	dditional sheets	for more space.)		
In the case of a trust , list t of the beneficiaries of the trustee or beneficiary of a paragraph 2 above.	trust and trust is a	the percentage corporation, pl	e of interest of eac ease provide the i	ch bene	ficiary. If any
Trust Name:					

NAME	TRUSTEE OR BENEFICIARY	ADDRESS	% OF INTEREST

(Use additional sheets for more space.)

For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

NAME		ADDRESS		% OF INTEREST
	(Use a	ndditional sheets for i	more space.)	
nembership interest.	If any membe a corporation,	er with two percent (2	%) or more m	wo percent (2%) or more nembership interest, manager, one the information required in
lame of LLC:				
				0/ 05 INTEREST
NAME			ADDRESS	% OF INTEREST
				% OF INTEREST
				% OF INTEREST
NAME n the circumstances of	(Use acoff a contract for	dditional sheets for mo	ADDRESS Dre space.) ame and add	ress of each contract
NAME n the circumstances ourchaser. If the purch	(Use acontract for a contract for a ser is a corp	dditional sheets for mo	ADDRESS ore space.) ame and add ship, or LLC,	
NAME The circumstances of urchaser. If the purchequired for those ent	(Use acontract for a contract for a ser is a corporative in paragr	dditional sheets for moor purchase, list the nooration, trust, partner	ADDRESS ore space.) ame and addreship, or LLC, above.	ress of each contract provide the information

Date	of Contract:	
Date	or contract.	

Please specify any contingency clause related to the outcome of the consideration of the application.

As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.

I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezone, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

Date		Owner, Agent, Applicant Signature
STATE OF FLORIDA		
COUNTY OF		
Sworn to for affirme	ed) and subscribed befo	are me hv
	eu f anu subscribeu bere	an this dow
of	, 20	Owner, Agent, Applicant Name
Signature of Notary	Public	Print, Type or Stamp Name of Notary Public
Personally Known _	OR Produ	ced Identification
Type of Identification	on Produced	