



AUTHORIZATION TO ACCESS PROPERTY

The undersigned property owner, hereby authorizes Alachua County, and its agents and contractors, to enter the following property for the purpose of verifying compliance with Alachua County Chapter 79, Article II Landscape Irrigation Design and Maintenance Standards. If the property is sold prior to the inspection of the installation of the irrigation system, the undersigned must notify Alachua County Environmental Protection Department.

Property Address (*or subdivision name and phase with attached lot list*):

Owner Name: _____

Owner Address (if different than property address above):

Expiration date of Authorization to Access Property (*the expiration date is two (2) years from the date recording unless a different date is specified.*) _____

Verification Pursuant to Section 92.525 Florida Statutes Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

Signatory Title/Office (*if applicable*):

Date