Benjamin W. Brown
Building Commissioner
Warrensville Heights Municipal Center
4743 Richmond Road
Warrensville Heights, OH 44128
P: 216-587-1230 / F: 216-587-1257
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INSTRUCTIONS FOR COMPLETING THE CITY OF WARRENSVILLE HEIGHTS PROPERTY OWNER IDENTIFICATION AND AUTHORITY AFFIDAVIT

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE SUBMITTING THE AFFIDAVIT.

1. **Complete the form in its entirety**. If the property owner is an individual person, and **is not an entity** (ex. corporation, limited liability company), then you do not have to complete paragraph 7 of the affidavit.

2. **Attach a copy of proof of your position with the property owner/entity.** If the property owner is an entity (ex. corporation, limited liability company) and you are the managing member, general partner or other person that has authority to act on behalf of the entity as indicated in paragraph 7 of the affidavit, you must attach a copy of proof of that position with the entity.

3. **Attach a copy of your photo identification.** You must attach a copy of the form of identification that is marked in paragraph 7 of the affidavit.

4. **Present your photo identification to the Notary Public at time of signing.** You will need to sign the affidavit **using blue ink** and **in the presence of a Notary Public**. At that time, you must also present your photo identification as indicated in paragraph 7 of the affidavit.

5. **The original affidavit must be submitted.** Copies of the affidavit will not be accepted. You must submit the original affidavit with your original signature in **blue ink** and the original signature/stamp of the Notary Public.

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CITY OF WARRENSVILLE HEIGHTS
PROPERTY OWNER IDENTIFICATION AND AUTHORITY AFFIDAVIT

State of _____

County of _____

I, the undersigned, being duly sworn, hereby affirm that:

1. My name is _____ and my contact information is as follows:
   Residential address:_____

   Phone Number: Email:_____

2. The purpose of this affidavit is to provide, establish and verify my identity as the owner or representative of the owner for the property that is the subject of the following application(s) to:

   ☐ Non-Owner Occupied Residential Property Registration
   ☐ Certificate of Residential Rental Compliance
   ☐ Residential Point of Sale Inspection
   ☐ Occupancy Permit for New Construction
   ☐ Commercial Point of Sale Inspection
   ☐ Commercial Occupancy Permit
   ☐ Vacant Building Registration
   ☐ Homeowners Affidavit Form
   ☐ Violation Extension Form
   ☐ Other: _____

3. The owner of the property is:

   Name: _____
   Residential Address:
   _____
   Phone Number: _____ Email: _____

4. Property: Address: _____
   _____

5. Property: Permanent Parcel Number:_____

6. I have the authority to act on behalf of the listed owner of the property subject to said application identified in paragraph 2 above and I agree to receive service of process for any proceedings on behalf of said owner.

7. *If the property owner is an entity (ex. corporation, limited liability company):*

   My title with the entity is indicated below ***and I have attached proof of said position to this affidavit***:

   ☐ Managing Member ☐ General Partner ☐ Statutory Agent
   ☐ Owner ☐ Property Management Company

8. On this ___ day of _____, 20___, I presented to the undersigned Notary Public as proof of my identity the following valid form(s) of identification ***and attached a copy said identification to this affidavit***:

☐ Driver's License ☐ State Identification ☐ U.S. Passport

I am familiar with and agree to comply with the rules and regulations of the City's Codified Ordinances and other applicable laws. I understand that submitting willful false statements on this affidavit are punishable under the law and may jeopardize the validity of the affidavit and application or document that I am submitting and any resulting registration, permit, or other action by the City of Warrensville Heights that I am seeking. I declare under penalty of perjury that the information I am submitting is true and correct.

Signature of Affiant: _____

Subscribed and sworn (or affirmed) on this _____ day of _____, 20____, by _____, who personally appeared before me as the signer and subject of the above form, who signed or attested to the same in my presence and proved to me on the basis of satisfactory evidence to be the person who appeared before me. This is an acknowledgement. No oath or affirmation was administered to this signer.

_____

Notary Public (Seal)

My Commission expires on _____