



City of Pompano Beach
Department of Development Services
Planning & Zoning Division

100 W. Atlantic Blvd Pompano Beach, FL 33060

Phone: 954.786.4679 Fax: 954.786.4666

Affidavit: Accessory Dwelling Unit

State of Florida}
County of Broward}

BEFORE ME on this day appeared, _____
("Affiant"), who being first duly sworn deposes and says the following:

1. I am the owner of the single family home and will be the owner of the Accessory Dwelling Unit located on the real property legally described in Exhibit A ("Property"), attached and incorporated by reference; also known as:
_____, Pompano Beach, FL.
2. I acknowledge and understand that Section 155.4303(A), City of Pompano Beach Zoning Code, considers Accessory Dwellings Units to be a half dwelling unit; that Section 163.31771, Florida Statutes, enables municipalities to allow Accessory Dwelling Units as Affordable Rentals; and that if the Accessory Dwelling Unit located on the Property is rented as an Affordable Rental, with a restriction, the Accessory Dwelling Unit will not be considered for the purposes of calculating density.
3. I attest the Accessory Dwelling Unit located on the Property will remain in the same ownership for as long as the Accessory Dwelling Unit remains on the Property and will be rented at an affordable rate to a person (or persons) earning an income defined as: extremely-low, very-low, low, or moderate as defined in Chapter 163, Florida Statutes.
4. I further attest that I will adhere to the use standards for Accessory Dwelling Units in the City Zoning Code and will be subject to code enforcement action if found in violation of those standards.
5. By recording this affidavit in the public records of Broward County, Florida, it is the Affiant's intention that all obligations and restrictions run as covenants with the land, which bind the current Property Owner and their heirs, successors and assigns, and may not be waived without the written consent of the City of Pompano Beach Development Services Director.
6. That the information I have provided above in this document is true and correct.

Signature

SWORN AND SUBSCRIBED before me this _____ day of _____, _____ by means of
☐ physical presence or ☐ online notarization.

NOTARY PUBLIC, STATE OF FLORIDA

(Name of Notary Public: Print, stamp, or Type as Commissioned.)

☐ Personally know to me, or

☐ Produced identification: _____
(Type of Identification Produced)