



Affected Property Owner Notarized Statement

Property Owner(s): \_\_\_\_\_

Address:
\_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

[ ] Yes, I agree to change the name of \_\_\_\_\_ to the new name of \_\_\_\_\_.

[ ] No, I do not agree to change the name of \_\_\_\_\_ to the new name of \_\_\_\_\_.

\_\_\_\_\_
Date

\_\_\_\_\_
Affected Property Owner's Signature

STATE OF \_\_\_\_\_
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did/did not take an oath.

\_\_\_\_\_
Notary Public Signature

Notary Stamp:

Note: Completed responses shall be submitted via email Addressing@ocfl.net or in person.