



CITY OF PARKLAND
PLANNING & ZONING DEPARTMENT
6600 University Drive
Parkland, Florida 33067
Office: (954) 753-5040 • Fax: (954) 341-5161
www.cityofparkland.org

Date: _____

City of Parkland Planning and Zoning Department
6600 University Drive
Parkland, Florida 33067

Attention: Planning and Zoning Department

Permit # _____

Address _____

I _____ affirm that I am the owner of the property located at _____ with the legal description as follows _____ and hereby certify that the Guest Suite to be built on my property is solely for the use of my family and will not be rented at any time. I am writing this letter to conform to the City of Parkland's Declaration of Restricted Covenants restricting guest suite to use of property owner only and affirm that violation of this restrictive covenant shall constitute a violation of the City Code. This resolution shall run with and bind the land and all future owners and _____ to the benefit of the City of Parkland. The undersigned agrees to pay a reasonable attorney's fee incurred by the City if it is required to take action to enforce the terms hereof. This covenant shall be recorded and run with and bind the land and all future owners of the land and successors and assigns of the undersigned.

AFFIRMED AND AGREED

Witness Signature _____

Witness Signature _____

Witness Named _____

Witness Named _____

Notary Public:

STATE OF FLORIDA

COUNTY OF _____

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

(Signature of Notary)

My Commission Expires: _____

(NOTARY'S SEAL OR STAMP)

(Name – Must be typed, printed, or stamped)