Office of Planning and Development – Building Division
PO Box 9005, Drawer GM02
330 W. Church Street
Bartow, Florida, 33831-9005
863-534-6080

www.polk-county.net/aca

Agricultural Exemption Affidavit

PERMIT NUMBER _____

This affidavit is to certify that the information given to the Polk County Building Division is true and accurate. I, _____ (print name), further certify that the proposed improvement is to be a nonresidential farm structure or for a nonresidential farm structure on property identified as being agricultural. I understand that I am exempt from the requirements of the Florida Building Code and the Polk County Land Development Regulations as allowed by Florida Statute Section 604.50, Nonresidential Farm Buildings. I understand that if the structure is used for any other purpose, i.e. dwelling, storage of personal goods, it would constitute a Land Development Code and Building Code violation. I will assume full responsibility as Owner and will personally be responsible.

I certify that my statements herein are true and accurate to the best of my belief and that I fully understand that making any false statements in writing with the intent to mislead a public servant in the performance of his or her official duty shall constitute a misdemeanor of the second degree pursuant to Section 837.06, Florida Statutes.

I hereby acknowledge that I have read and understand the above affidavit on this _____day of _____, 20___

_____ _____

Signature of Owner Printed Name of Owner

State of Florida, County of _____. Sworn to (or affirmed) and subscribed

The foregoing instrument was sworn to and subscribed before me this _____

day of _____, 20____ by_____ who is

personally known to me or has produced _____ as identification and who did take an

oath.

_____ _____

Signature of Notary Print or type or stamp name of notary