



City of Jacksonville Beach
Home Occupation Permit
Property Owner Authorization

Date: _____

Property Owner Name: _____

Mailing Address: _____

Phone: _____

E-mail: _____

This is to confirm that the applicant for a Jacksonville Beach Type I Home Occupation Permit has my authorization to use the property address for the purpose of a home-based business address, pursuant to the Land Development Code Sec.34-399 Home Occupations.

Tenant/Applicant Name: _____

Property Address: _____, Jacksonville Beach.

Property Owner/Agent - Signature

State of Florida
County of Duval

Sworn to (or affirmed) and subscribed before me on this _____ day of _____,
20____, by _____,

who personally appeared before me and executed this document in his/her authorized capacity of
Property Owner/Agent.

Personally known to me _____ or Produced identification _____

Type of Identification: _____

WITNESS my hand and official seal.

Commission No. _____

Commission Expires: _____

Signature: _____

Notary Public, State of Florida

Notary Name Printed

(Seal - Above)