## **Certification of Residency**



Section I – Parent/Guardian Affidavit		
l,Parent Name (Printed)	, verify that myself and my children:  (Children's Names)	
Reside at:		
	anor punishable by a definite term of imprisonment, not exceeding of 5.083, F.S.) the information provided on this form is true and cory be subject to prosecution for fraud.	
Signature of Client	Date	
Sworn to (or affirmed) and subscribe  Name of person making statement	d before me this day of	, 20, by
Notary Seal	Signature of Notary Public-State of Florida	
Personally Known, -OR- Produced Identification Type of ID Produced:		
Section II – Landlord/Property Owner Affic	lavit	
I verify that the individuals listed in Section I	are residing at my residence/property at the addr	ess below:
	Property Address	
	anor punishable by a definite term of imprisonment, not exceeding of 5.083, F.S.) the information provided on this form is true and concy be subject to prosecution for fraud.	· · · · · · · · · · · · · · · · · · ·
Name of Landlord/Property Owner	Signature of Landlord/Property Owner	 Date





