



TOWN OF MANALAPAN
BEACH HOUSE AFFIDAVIT



BEFORE ME, the undersigned authority, personally appeared _____
(Applicant Name, please print)

And being duly sworn and deposed, says as follows:

- 1. Address:
2. Owner(s):
3. Phone Number(s) (Home and/or Cell):
4. Permit Number: TCOM approval date: ARCOM approval date:
5. I am the owner of the home on which the associated beach house resides or will reside.

I agree to the following conditions:

Initial

- Beach houses may not be used by any person for any purpose unless and/or until a Certificate of Occupancy has been issued for an associated single-family dwelling which is located on the same lot or lot of record.
If the associated single-family dwelling becomes uninhabitable, is abandoned or ceases to exist for any reason, whatsoever, any and all use of the subject beach house shall be strictly prohibited unless and/or a Certificate of Occupancy has been issued for an associated single-family dwelling which is located on the same lot or lot of record.
Beach houses may contain a bathroom, a kitchen and other rooms but which may not have or contain sleeping rooms and which may not be used as a dwelling or rental unit. See 151.003, Town Code.
Beach houses are for the use of the property owner, invited family members and bona fide non-paying guests.
Beach houses may not be rented or utilized as a guest house under any circumstances, whatsoever.

I hereby affirm that I have read Section 151.050 and/or 151.093 of the Town of Manalapan Code of Ordinance pertaining to special exception beach houses, and understand the restrictions and limitations placed upon my beach house by the provisions therein. At any time if there is a complaint of non-compliance against the property address in regards to the beach house, I understand that the property owner may be subject to Code Enforcement actions. If found in violation, the property owner may be called before a special magistrate hearing which could result in assessed daily fines.

(Initial)
(Signature of Applicant)

Print Name:

County of

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

(Signature of Notary Public - State of Florida) Personally Known: OR Produced Identification:
Type of Identification Produced: