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# CITY OF BELVEDERE

450 San Rafael Avenue • Belvedere, CA 94920-2336  
Tel: 415/435-3838 • Fax: 415/435-0430 • [www.cityofbelvedere.org](http://www.cityofbelvedere.org)

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## AFFIDAVIT REGARDING OWNER OCCUPANCE AFTER LOT SPLIT

Owner-Occupant Name(s) \_\_\_\_\_

Property Address(es) \_\_\_\_\_

Assessor's Parcel Numbers(s) \_\_\_\_\_

1. I am the owner of the real property identified above.
2. On \_\_\_\_\_, I, or my authorized agent, submitted an application to the City of Belvedere for a parcel map subdividing the Property pursuant to the procedures outlined in California Government Code Section 66411.7 and Belvedere Municipal Code Chapter 18.27.
3. I intend to occupy one of the housing units as my principal residence for no less than three years from the date the City of Belvedere approves my application to split my lot pursuant to Government Code section 66411.7.

I declare, under penalty of perjury under the laws of the State of California that the foregoing is true and correct and this affidavit was executed on the \_\_\_\_ of \_\_\_\_\_, 20\_\_, at \_\_\_\_\_, California.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

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A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the veracity, accuracy, or validity of that document.

State of California

County of \_\_\_\_\_

On [DATE], before me, [NOTARY NAME], Notary Public, personally appeared [APPLICANT NAME], who provide to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subjected to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) executed the instrument.

I certify, under penalty of perjury under the laws of the state of California, that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature \_\_\_\_\_

