



6015 Glenwood Street ■ Garden City, Idaho 83714
 Phone 208/472-2921 ■ Fax 208/472-2996 ■ www.gardencityidaho.org

AFFIDAVIT OF USE

State of Idaho)
) ss.
 County of Ada)

Name:
Mailing Address:
E-mail Address:
Phone #: ()

_____, CERTIFIES BY A WRITTEN DECLARATION UNDER PENALTY OF PERJURY:

1. That the property located at _____, Garden City, Idaho, 837____, parcel _____, was previously utilized for the use of _____ from the date of _____ until a date of _____.

2. During or since the abovementioned use at this location:

- There has not been any change or expansion of the structure or use at this property; or
- There has been a change or expansion of the structure or use at this property.

2a. If there has been a change or expansion of the structure or use at this property, such expansion or use was: _____

3. During or since the abovementioned use at this location:

- There has not been any abandonment of the structure or use at this property; or
- There has been abandonment of the structure or use at this property.

3a. If there has been abandonment of the structure or use at this property, the details and the length of the abandonment were: _____

4. During or since the abovementioned use at this location:

- The structure has not been destroyed or damaged; or

The structure has been destroyed or damaged.

4a. If the structure has been destroyed or damaged, the percentage of its current assessed taxable value destroyed or damaged was: _____

5. I acknowledge by my signature that at this location:

I will not change or expand the structure or use at this property; or

I request that I be permitted to change or expand the structure or use at this property.

5a. If I am requesting that I be permitted to change or expand the structure or use at this property, such intended change in use or expansion is: _____

I acknowledge by my signature that the instant Affidavit of Use may be recorded with the Ada County Recorder by the City of Garden City.

I acknowledge by my signature that the City of Garden City may investigate the abovementioned claims and information.

I acknowledge by my signature that if the City of Garden City investigates the abovementioned claims and/or information and finds it to be inaccurate, the City has the right to revoke any permit for this location.

I acknowledge by my signature that I agree to indemnify, defend and hold the City of Garden City and its employees harmless from any claim or liability resulting from any dispute as to the statements contained herein, and I am wholly responsible for the accuracy of the statements contained herein.

DATED this ____ day of _____, 20__.

Signature

State of Idaho)
) ss.
County of Ada)

On this ____ day of _____, 20__, before me _____, a notary public, personally appeared _____, personally known to me to be the person whose name is subscribed to within the instrument, and acknowledged to me that he/she executed the same.

S
E
A
L

Notary Public
My Commission Expires: _____