



## MERCHANT'S AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_  
Who being duly sworn states the following: *(Print Name of Applicant)*

- 1) Name of Business: \_\_\_\_\_
- 2) That He/She is the: \_\_\_\_\_  
*(President, Owner, Agent, Director, Etc.)*

Of the above described business and makes the Affidavit of His/Her personal knowledge.

- 3) That the retail and/or wholesale value of inventory of this business is not greater than:  
\$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_

Day of \_\_\_\_\_, 20\_\_\_\_, at Sunrise,  
Broward County, Florida.

\_\_\_\_\_  
NOTARY PUBLIC - STATE OF FLORIDA AT - LARGE

My Commission Expires:

- Personally Known
- Produced I.D.
- Type of I. D. Produced: \_\_\_\_\_