NOTARIZED CERTIFICATION OF APPLICANT(S)

Applicant Information	
Name(s)	
Mailing Address	
Telephone	
Fax	
Email	
Project PIN/Address	
voluntarily submitted this Boa Applicant(s) of the property Adjustment Application; that a data and other supplementary	, the undersigned, being first duly sworn, depose and say that and of Adjustment Application to the City of Raleigh; that I am the described and which is the subject matter of this Board oull answers to the questions in this application, and all plans, sketches information attached to this application are honest and true to the ief. Submission of an incomplete or incorrect application may result rejection of my application.
officer; If the Applicant a Applicant is a limited liab managed LLC, or all the	is a corporation, this must be signed by an authorized corporate is a partnership, this must be signed by a general partner; If the bility company, this must be signed by the Manager for a manager members for a member managed LLC.] For multiple Applicants, d Certification of Applicant(s) pages.
Date:	Signature
STATE OF NORTH CAROLINA COUNTY	
he or she signed the foregoing app	(s) personally appeared before me this day, each acknowledging to me that plication for the purpose stated therein and in the capacity indicated:
Date:	
<u> </u>	Official Signature of Notary
[NOTARY SEAL]	Notory Dublic
	Notary's Printed or Typed Name, Notary Public
	My Commission expires: