



GENERAL AFFIDAVIT

Date: _____ Unit #: _____ 851 Tower

I/we, the undersigned, certify that the person(s) staying in unit # _____ for _____ days are in fact family member/guests and are not paying rent, fees, or any monetary obligation to the owner of the above mentioned unit.

Further, I/we agree that I/we are fully responsible for our actions while at The Plaza on Brickell 851 Tower, a Condominium, and understand that I/we must abide by all governing documents including Declaration of Condominium, Articles of Incorporation, By-Laws, and Rules and Regulations. All adult person(s) over the age of 18 must provide management office with a valid identification.

Name (List everyone visiting the unit)	Relationship to Owner(s)	Adult	Minor	D.O.B.
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

It is the sole responsibility of the owner/tenant to make all arrangements for their guest(s) to have access to their unit; the resident must provide unit keys for the authorized party. Management will not be responsible to provide keys under any circumstances.

(Signature of Family/Guest)

(Signature of Family/Guest)

(Print Name of Family/Guest)

(Print Name of Family/Guest)

(Signature of Family/Guest)

(Signature of Family/Guest)

(Print Name of Family/Guest)

(Print Name of Family/Guest)