



AFFIDAVIT OF LEGAL INTEREST

PO Box 13 | 751 W 4th Street | Kuna, ID 83634
(208) 922-5274 | www.KunaCity.ID.gov



State of Idaho)
) ss
County of Ada)

I, _____ Full Name _____,

Address City State ZIP

Being first duly sworn upon oath, depose and say: (If Applicant is also Owner of Record, skip to B)

A. That I am the record owner of the property described on the attached, and I grant my permission to

_____ Full Name _____

Address City State ZIP

to submit the accompanying application pertaining to that property.

B. I agree to indemnify, defend, and hold City of Kuna and its employees, harmless from any claim or liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

C. I hereby grant permission to the City of Kuna staff to enter the subject property for the purpose of site inspections related to processing said application(s).

Dated this _____ Date _____ day of _____ Month _____, 20____ Year _____

Signature

Subscribed and sworn to before me the day and year first above written.

Print Name

Residing at: _____
Address

City State ZIP

Affix Seal Here

My Commission expires: _____
Date

Signature