

AFFIDAVIT

The undersigned *(insert name(s) of property owner(s))*, being over the age of eighteen (18) years and believing in the obligation of an oath, certify, make affidavit and say as follows:

1. I am *(we are)* the owner(s) of property at *(insert street number and address)*, Wilton, Connecticut;
2. I am *(we are)* in residence at the dwelling located at the above address;
3. This certification is made pursuant to §29-4.D.1.h. of the Zoning Regulations of the Town of Wilton, Connecticut.

(signature of owner) _____ *(date)*

(print or type name of owner)

(signature of co-owner) _____ *(date)*

(print or type name of co-owner)

Subscribed and sworn to before me

(notary public inserts date)

(signature of notary public)

(printed name of notary)