



FORM M-A

MERCHANT'S AFFIDAVIT

State of Florida
County of Broward

FORM MUST BE PRINTED AND SIGNED IN THE PRESENCE OF A NOTARY

BEFORE ME, the undersigned authority, personally appeared

_____ to be known to be the person executing

(Applicant's Name)

this Affidavit and states as follows:

- 1) Name of Business: _____
- 2) That he/she is the _____, of the above-named business and makes this affidavit of his/her own personal knowledge.
- 3) That the retail wholesale value of the aforesaid business is not greater than \$ _____
(only include the value of items you have for sale).
- 4) That this statement is made in accordance with Section 12-12(113) of the City of Margate Code of Ordinances.

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this _____ day of _____, _____ (year), by _____ (name of person making statement).

Personally known to me _____

Produced identification _____

Type of identification _____
