

****complete only if residing in home without lease****

Revised 2/14

MAYFIELD CITY SCHOOL DISTRICT RESIDENCE AFFIDAVIT

I, _____, certify that I am the owner of the dwelling located at:
Owner

Address: _____

City _____ Zip Code _____

I, _____, certify that _____ will be a
Owner Occupant

full-time resident of the above home located within the Mayfield City School District, along with those listed below, and does not maintain a separate residence elsewhere. Date of Occupancy _____.

****This form and proof of the above residence must be provided to school officials yearly****

Proof of Residency should include at least (2) two of the following for the owner:

- a tax bill, home mortgage bill or home insurance;
- the other form should include a utility bill (gas, electric, water or sewer).

Proof of Residency (1) for the occupant:

- A bill or bank statement that comes to the occupant's name at this address.

List below the names of all persons living at the above address:

Adults	Children	Child's Birthdate
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Owner's relationship to the occupant is: _____

I have read this entire document and the information provided by me on this form is true and accurate. It will be my responsibility to notify the school district if any of the above occupants move from this address. **(Please sign only in the presence of a Notary Public)**

NOTE: Be sure you have read this statement carefully before you sign. Giving false information under oath can be punishable as a criminal offense under the Ohio Revised Code 2921.13 and 2921.21, a misdemeanor of the first degree with a maximum fine of \$1,000 and/or jail term of six months. In cooperation with the cities of the Mayfield City School District, each violation can be thoroughly and vigorously prosecuted.

Signature Date Phone

Sworn to and subscribed before me the _____ day of _____, 20__

Affix seal here _____
Notary Public