

SB 9 OWNER-OCCUPANCY ATTESTATION FORM

This form must accompany an application for a subdivision under [Senate Bill 9](#) (SB 9) and [City Section 20.30 Part 8 of the San Jose Municipal Code](#). By completing and signing this form, you are providing a written affidavit by which you are swearing the information contained herein is true. Signing an affidavit that contains false information can subject you to criminal penalties. For more information about the SB 9 subdivision process, please contact Public Works at **408-535-7802** or email pwgeneralinfo@sanjoseca.gov.

Understand any CC&Rs before proceeding - If your lot is subject to a private agreement known as Conditions, Covenants, and Restrictions (CC&Rs), you are advised to check your property title and consult with your homeowners association, as applicable, to identify such CC&Rs before applying for an SB 9 project. CC&Rs may restrict the number of units that can be built on a property. Note that the City cannot enforce a private agreement between property owners.

Download and save this form to your computer and then complete it.

Note the form must be wet signed and notarized.

AFFIDAVIT OF INTENT TO OWNER-OCCUPANCY

1. On [DATE] , I submitted an application to the City of San José Department of Planning, Building and Code Enforcement for a parcel map to subdivide the real property located at [STREET ADDRESS] , California, which is also identified as County of Santa Clara Assessor's Parcel Number (hereinafter "the Property"), pursuant to the procedures outlined in Government Code Section 66411.7 and Title 19 of the San José Municipal Code.
2. I am the current owner of record of the certain real property described above.
3. I intend to occupy, as my principal residence and for a period of no less than three (3) years from the date of approval of the parcel map, in one of the dwelling units located on the Property.
4. I understand and agree that the Department of Planning, Building and Code Enforcement of the City of San José may take such action as it deems necessary to verify both the accuracy and veracity of this affidavit. I further understand and agree that any person or entity contacted by the Department of Planning, Building and Code Enforcement, or its contractors, agents, grantees, or designees, in the course of such verification, may release such pertinent information to the Department of Planning, Building and Code Enforcement, or its contractors, agents, grantees, or designees.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct and that this affidavit was executed on [DATE] at [CITY] , California.

• **SIGNATURE** of Property Owner

PRINT NAME

Continue for notarization>

Note the form must be wet signed and notarized.

NOTARIZATION

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the veracity, accuracy, or validity of that document.

State of California

County of _____

On the ____ day of [Mo, Year] _____, before me, _____, a Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: _____

Name: _____

(Print)

(Seal)