This agreement is between City of Fort Myers, Florida and Owner: ____________________________________________

Owner’s mailing Address: ________________________________________________________________

Phone Number: ________________________________________________________________

The Parties agree as follows:

1. The location of the owner’s property is ____________________________________________

2. Owner has filed an application for relief from the Land Development Code, Chapter 102, requesting the ability to replace shingles on an existing roof with a pitch less than 2:12.

3. City of Fort Myers agrees to grant owner a permit to re-shingle the owner’s (type of structure) ____________________________________________ with a roof pitch of _______.

4. Owner agrees to indemnify City of Fort Myers against all claims, liabilities and expenses that result from this grant of relief.

5. This agreement binds the parties as well as their heirs, successors, and assigns.

6. No amendment of this agreement is valid unless it is in writing and signed by the parties.

7. This document will be recorded in the public records of Lee County and serve as notice to all potential purchasers that the subject roof is at a pitch less than 2:12.

I hereby certify that I, ____________________________________________ am the owner of the above described property and that I agree to the above statements.

***Sign only in the presence of a Notary Public***

Owner’s Signature ____________________________________________

Owner’s Printed Name ____________________________________________

Date ______________, STATE OF __________, COUNTY OF ________ Sworn to (or affirmed) and subscribed before me this ______ day of ______ , by __________ (name of person making statement), Personally known ___ OR Produced identification ___, type of identification _______________________________(Signature of Notary Public) (Print, Type or Stamp

Commissioned Name of Notary Public)

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Building Official Signature ____________________________________________

Building Official Print ____________________________________________

Date ______________, STATE OF __________, COUNTY OF ________ Sworn to (or affirmed) and subscribed before me this ______ day of ______ , by __________ (name of person making statement), Personally known ___ OR Produced identification ___, type of identification _______________________________(Signature of Notary Public) (Print, Type or Stamp

Commissioned Name of Notary Public).