



# NORWALK PUBLIC SCHOOLS PROPERTY OWNER/LANDLORD AFFIDAVIT

The district will investigate the residency of families who use a Property Owner/Landlord Affidavit

**PROVIDING ANY FALSE INFORMATION, STATEMENTS, OR PROOF OF RESIDENCY IS A VIOLATION OF LAW AND WILL BE SUBJECT TO LEGAL ACTION AND THE PAYMENT OF TUITION**

I \_\_\_\_\_ owner/landlord of \_\_\_\_\_  
Name (Last, First, Middle) Address (Street #, Town and ZIP Code)

Hereby attest to the fact that \_\_\_\_\_ reside at the above listed address  
Parent/Guardian Name (Last, First, Middle)

with student(s):  
\_\_\_\_\_  
Student Name (Last, First, Middle) Student Name (Last, First, Middle)  
\_\_\_\_\_  
Student Name (Last, First, Middle) Student Name (Last, First, Middle)

If you have any questions please contact me at ( ) \_\_\_\_\_  
(Telephone Number)

Utilities are included  Yes  No

A copy of a recent utility bill, indicating Property Owner/Landlord's name, must be submitted

..... Sign only in presence of Notary .....

Date \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

State of Connecticut  
County of \_\_\_\_\_ ss. (\_\_\_\_\_)

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_, the Undersigned officer, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person(s) whose name(s) (is or are) subscribed to the within instrument and acknowledged that (he, she or they) executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and stamp or seal.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Date Commission Expires