SOUTH EUCLID-LYNDHURST SCHOOLS

OWNER AFFIDAVIT

Important Note: *This form is* ***only*** *required if the Parent/Guardian of the child(ren) being enrolled* ***lives with another adult*** *and the Parent/Guardian does not have a lease or mortgage in their name for the residence/apartment located in the South Euclid-Lyndhurst School District.*

I,_____, certify that I am the ◉ owner **OR** ○ tenant of the home/apartment located at_____, _____, OH _____
(Address) (City) (Zip Code)

I further certify that the below listed tenants have established permanent residence in the aforementioned residence/apartment with me and, to the best of my knowledge, are not maintaining a separate residence elsewhere.

_____ (Adult and Relationship)	_____ (Child and Relationship)
_____ (Adult and Relationship)	_____ (Child and Relationship)
_____ (Adult and Relationship)	_____ (Child and Relationship)
	_____ (Child and Relationship)

Please read each statement and then place your initials to the left of the statement.

_____ I understand that it will be **my responsibility** to notify the South Euclid-Lyndhurst School District Registration (**216-691-2062*)*** when the above-named family no longer resides in my home/residence.

_____ I understand that should any of the above statements be false, I am liable for any penalties including, but not limited to, **the collection of any money owed for tuition purposes** for which the law provides under the pertinent criminal code plus interest at a rate of 1.5% per month, administrative costs, court costs, and any attorney fees incurred in the collection of those sums.

_____ I agree to, and stipulate, that South Euclid-Lyndhurst School District may use whatever legal means it has at its disposal to verify my residency, including having an attendance officer visit my home to ensure that the family named above, resides at this address.

Signature:

_____ _____
Owner/Tenant Date

_____ _____
Printed Name of Owner/Tenant Phone Number of Owner/Tenant

Ohio Notary Acknowledgement: State of_____ County of _____ The foregoing instrument was acknowledged before me this_____ by _____
(date) (name of person acknowledged)

SEAL:

Signature of Notarial Officer _____

Title or Rank _____

Serial Number (if any) _____