

Affidavit for Setback Allowance for ADA Accessible Ramp

We certify that the proposed ADA ramp at the following address

, , , , , , , , , , , , , , , , , , , ,	
will be built to all ADA standards for the explicate use of residents an property. The attached legal description identifies the property when	e the proposed ramp will be
located. At which time the ramp is no longer needed for the use of the brought into compliance with all Zoning Ordinance standards.	e property, it shall be removed or
All local permits shall be applied for before the structure is constructed built to be temporary in nature and grant access only to preexisting e	•
Property Owner Signature:	Date:
Property Owner (Print Name):	
State of Indiana, County, SS:	
This record was signed and sworn to (or affirmed) before me on	(date)
by	(Printed Name).
Signature of Notarial Officer:	
My commission expires:	
Prepared by:	
(Printed Name)	
I affirm, under the penalties for perjury, that I have taken reasonable	care to redact each Social Security
Number in this document, unless required by law.	
(Print Document Created by: City of Elkhart Planning & Zoning	ed Name)

Document Created by: City of Elkhart Planning & Zoning 229 S 2nd Street, Elkhart, IN 46516 (574) 294-5476