

Affidavit Regarding the Removal of an Illegal Sign

My name is _____.

My mailing address is _____.

My telephone number is _____.

My alternative telephone number is _____.

In submitting this affidavit I agree to appear and testify at any court or administrative hearings regarding the alleged violation. I understand that the entity listed below will not share in any fines if I fail to appear and testify at any administrative or court hearings concerning the violation. _____ (initial)

I agree to supply any additional information that the City of Baltimore requests regarding my removal of the Sign. _____ (initial)

I designate the following non-profit community or neighborhood association (designated entity) to share in any fines that are collected in this matter (optional):

(state the designated entity's name, address, phone number and if available the City vendor identification number).

I understand that this entity will not share in any fines if none are collected in this matter. I understand that the entity might be required to provide additional information to the City of Baltimore before the entity may receive any payment. _____ (initial)

I, _____, solemnly swear and affirm on this _____ day of _____, 20____, under the penalty of perjury that:

1. I am at least 18 years old;
2. At _____ a.m. / p.m. on _____ (date), I personally observed that the sign submitted with this affidavit (the "sign") was posted on _____ (describe the structure or area), which is located at _____

(state the street address and any additional description regarding the location of the sign). The sign was posted using the following method: _____
_____ (for example, tape, staples).
3. True and accurate photographs (the "photographs") of the sign that I observed are submitted with this affidavit.

4. After I observed the sign and took the photographs, I removed the sign and have submitted it with this affidavit.

5. (If applicable)

a. To the best of my information and belief, the following person(s) **posted the Sign**:

_____. The address and telephone number of that person or persons is: _____. My information and belief is based on the following facts: _____

_____.

b. To the best of my information and belief, the following person(s) are **responsible for the Sign**: _____.

The address and telephone number of that person or persons is: _____
_____. My information and belief is based on the following facts: _____

_____.

I FURTHER AFFIRM under the penalties of perjury and upon personal knowledge that the contents of the foregoing paper are true.

Print Name

Signature

Date

Notarization:

State of Maryland, City/County of _____

I certify that on this _____ date of _____, 20__, before me, a Notary Public in and for the City/County of _____, personally appeared _____, who acknowledged that the preceding affidavit was his/her act. As witness, my hand and Notarized Seal:

Notary Public

My commission expires: _____

Submit the completed affidavit, together with the sign and photographs to: Baltimore City Department of Housing and Community Development, Sanitation Enforcement Unit, 417 E. Fayette Street, Room 128, Baltimore, Maryland 21202.