



Certified Survey Affidavit

Survey
LCD 3
V2 11/2014

Street Address of Proposed Premises _____

City _____ County _____

In the case of a location outside the corporate boundary, include the following:

I, _____, am a County Surveyor City Surveyor Private Licensed Land Surveyor and have the knowledge and the authority to attest that the distance was measured by radial survey method from the nearest corporate city boundary to the nearest entrance of the proposed premises known as _____ (Business Name). Plat(s)/map(s) verifying the location that indicate the points between which the measurement was made and the distance can be provided upon request.

In the case of a location inside the corporate boundary, include the following:

I, _____, am a County Surveyor City Surveyor Private Licensed Land Surveyor and have the knowledge and the authority to attest to the location of the premises known as _____ (Business Name) was determined by examination of corporate plats or other official records.

Location of Premises (check one)

- Within the incorporated boundaries of _____ (Name of City)
- Less than five miles from the nearest corporate boundary of _____ (Name of City)
- More than five miles from any incorporated city within _____ (Name of County)

If the premises is outside an incorporated city, please provide the exact distance (in hundredths of a mile) from the nearest corporate boundary to the nearest entrance of the premises. .

By signing this form, I recognize state law requires the distance be measured in a straight line from the nearest entrance of the premises proposed for licensing to the nearest corporate boundary of the city or town.

Signature Title

Surveyor License or Registration Number _____

Subscribed and sworn to before me this _____ day of _____ 20_____.

On this _____ day of _____ 20_____.

Notary Seal

Personally appeared _____
before me a Notary Public for the State of _____

Notary Signature

Print Name of Notary

My Commission Expires _____ Month, Day and Fourth digit of Year