



Motor Vehicle Broker (Zoning Certification) Affidavit

I, the undersigned, understand and agree the motor vehicle brokerage shall automatically terminate in the event that this property is sold, transferred or otherwise conveyed to any other party; or the business is sold, transferred or otherwise conveyed or discontinued.

Legal Name of Business: _____

Trade Name / DBA Name: _____

Property Street Address: _____

City: _____ State: _____ ZIP Code: _____

Contact Name: _____ Phone: _____

Email Address: _____

I affirm that the motor vehicle brokerage at the above address shall maintain a valid City of Peachtree Corners Occupational Tax Certificate (OTC – commonly referred to as a Business License) displayed on the premises, and shall be limited to an office use only. **Storing, taking delivery of, displaying, repairing or refurbishing of automobiles is prohibited.** If such activities are undertaken at this location, the use would be a violation of the City of Peachtree Corners Zoning Ordinance.

By executing this affidavit, I understand and agree to abide by the above terms.

Corporate Officer (Print Name): _____

Date Signed: _____ Corporate Officer Signature: _____

Subscribed and sworn to before me

This _____ day of _____, 20_____

(Clerk / Notary Public)

My commission expires: _____

Notary Seal Above

STAFF USE ONLY	
	Account Number: _____
Date: _____	Zoning Authorization: _____
\$500 Fee Paid: _____	Date: _____ Received By: _____