



PLANNING DEPARTMENT  
201 N 2<sup>ND</sup> STREET  
PALATKA, FL 32177  
386.329.0100 EXT. 327

# Declaration of Unity of Title

KNOW ALL PERSONS BY THESE PRESENTS, that pursuant to the applicable ordinances of Putnam County, Florida pertaining to the issuance of building permits and regulating land development activities, the undersigned, \_\_\_\_\_, being the fee owner of the following described real property lying, being situate in Putnam County, Florida, to-wit:

Parcel # \_\_\_\_\_

Parcel # \_\_\_\_\_

Parcel # \_\_\_\_\_

Parcel # \_\_\_\_\_

Or see attached schedule "A."

does hereby make the following declarations of conditions, limitations, and restrictions on said lands, hereinafter to be known and referred to as a DECLARATION OF UNITY OF TITLE, as to the following particulars:

1. That the aforesaid plot or combinations of separate lots, plots, parcels, acreage, or portions thereof, shall hereafter be regarded as and is hereby established and declared to be unified under one title as an indivisible building site.
2. That the said property shall henceforth be considered as one plot or parcel of land, and that no portion thereof shall be sold, assigned, transferred, conveyed, or devised separately except in its entirety, as one plot, parcel of land.
3. This Declaration of Unity of Title shall constitute a covenant running with the land, as provided by law, and shall be binding upon the undersigned, its successors and assigns, and all parties claiming thereunder and no portion shall be sold, assigned, transferred, conveyed or devised separately except in its entirety as one plot or parcel until such time as the same may be released in writing under the order of the County Administrator or recorded in the public records of Putnam County, Florida.

**Acknowledge and Witness**

Owner Name (Print Name): \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name (Print Name): \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Name (Print Name): \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Name (Print Name): \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_ County of \_\_\_\_\_

Before me this day personally appeared \_\_\_\_\_ who executed the foregoing application and acknowledged to and before me executed this document for the purposes therein expressed.

WITNESS my hand and official seal, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_.

(Notary Seal)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_ State of \_\_\_\_\_ at Large.

Type of Identification Produced: \_\_\_\_\_