



## BED AND BREAKFAST AFFIDAVIT

I/We, \_\_\_\_\_, being the legal owner(s) of property located at:

Parcel Number: \_\_\_\_\_

Site Address: \_\_\_\_\_

\_\_\_\_\_

I declare my intent to use this property as a Bed and Breakfast pursuant to **Pierce County Title PCC 18A.37.040 A**. I provide the following contact information for this property:

Owner Contact (*required*)

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Representative Contact (*if applicable*)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Property Management Contact (*if applicable*)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I attest that I have reviewed the Pierce County Code requirements for operation of the Bed and Breakfast as described above.

I understand that failure to meet these standards will result in a cease and desist of the Bed and Breakfast operation from the location listed above.

\_\_\_\_\_  
Signature of owner(s):

\_\_\_\_\_  
Print Name:

STATE OF WASHINGTON    )  
COUNTY OF PIERCE        )

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared \_\_\_\_\_ who is known to be the individual described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument as a free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Washington

Residing at \_\_\_\_\_

My commission expires \_\_\_\_\_

\_\_\_\_\_  
AFFIX SEAL OR STAMP ABOVE THIS LINE