City of Cooper City

Affidavit of Good Moral Character

STATE OF FLORIDA
(COUNTY OF BROWARD)

Before me this day personally appeared _____ who,
(Printed Name)
being duly sworn, deposes and says:

As an applicant for the Local Business Tax Receipt for _____, I
(Business Name)
hereby attest to meeting the requirements for application, that I am of good moral character, that I have not been found guilty of, or entered a plea of nolo contenders or guilty to, any offense prohibited under any of the following provisions of the Florida Statutes or under any similar statute of other jurisdiction, I have not had a finding of delinquency or entered a plea of nolo contendere or guilty to a petition alleging delinquency pursuant to Part II, Chapter 39, Florida Statutes or similar statutes of other jurisdictions, for any of the following acts, I understand I must acknowledge the existence of any criminal or delinquency record regardless of whether I was adjudged guilty by the court and regardless of whether or not those records have been sealed or expunged.

	Section	415.111	Abuse, Neglect or Exploitation of aged or disabled persons.
	Section	741.30	Domestic Violence.
	Section	782.04	Murder.
	Section	782.07	Manslaughter.
	Section	782.071	Vehicular Homicide.
	Section	782.09	Killing of unborn child by injury to the mother.
	Section	784.011	Assault, if the victim of the offense was a minor.
	Section	784.021	Aggravated Assault.
	Section	784.03	Battery, if the victim of the offense was a minor.
	Section	784.045	Aggravated Battery.
	Section	787.01	Kidnapping.
	Section	787.02	False Imprisonment.
	Section	787.04	Moving children for the State or concealing children contrary to court order.
	Section	794.011	Sexual Battery.
	Section	794.041	Prohibited acts on persons in familiar or custodial authority.
	Section	796	Prostitution.
	Section	798.02	Lewd and Lascivious Behavior.
	Chapter	800	Lewdness and Indecent Exposure.
	Section	806.01	Arson.
	Section	812.13	Robbery.
	Section	817.563	Fraudulent sale of controlled substances. Only if the offense was a felony.
	Section	826.04	Incest.
	Section	827.03	Aggravated Child Abuse.
	Section	827.04	Child Abuse.
	Section	827.05	Negligent treatment of children.
	Section	827.071	Sexual Performance by a child.
	Chapter	847	Obscene Literature.
	Chapter	893	Drug Abuse Prevention and Control. Only if the offense was a felony or if any of the other persons involved in the offense was a minor.

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I further attest that I have not been judicially determined to have committed abuse or neglect against a child as defined is s.39.01, Florida Statutes; nor do I have a confirmed report of abuse, neglect or exploitation as defined in s.415.503; which has been uncontested or upheld pursuant to the procedures provided in s.415.103 or s.415.104, Florida Statutes.

Under penalty of perjury, I attest that I have read the foregoing , and the facts alleged are true to the best of my knowledge.

_____
Affiant (Signature)

_____
Affiant (Printed)

---------- OR ----------

To the best of my knowledge, my record may contain one or more of the foregoing disqualifying acts or offenses.

_____
Affiant (Signature)

_____
Affiant (Printed)

Sworn to and subscribed before me this _____ day of _____20_____.

_____
Notary Public
State of Florida

(Stamp or Seal)

_____
(Print Name of Notary Public)
_____ Personally Known
_____ Produced Identification
Type of identification produced:
_____