



Department of Growth Management

Declaration of Unity of Title

THIS Declaration of Unity of Title, made this ____ day of _____, 20____,

by; _____

Name of Property Owner(s)

Address of Property Owner(s)

of; _____

Name of Partnership/Corporation

Title/Position

County of _____, State of _____, hereinafter referred to as "Declarant," pursuant to the Lake County Land Development Regulations, being the fee owner of the following described real property located in Lake County, Florida, to wit:

Alternate Key Number(s): _____

Sec. _____ Twp. _____ Rng. _____

Hereby make the following declarations of condition, limitation and restriction 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 of, or combination of separate lots, plots, parcels, acreage or portions thereof, shall hereinafter be declared to be unified under one title as an indivisible building site, unless the County approves a Development Order consistent with the County Land Development Regulations.
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 or parcel of land.
3. Purpose of unity: _____

DECLARANT further agrees that this Declaration of Unity of Title shall constitute a covenant to run with the land, as provided by law, and shall be binding upon the Declarant, his/her heirs, successors and assigns, and all parties claiming under him/her until such time as the same may be released in writing by Lake County, a political subdivision of the State of Florida. Declarant also agrees that this Declaration of Unity of Title shall be recorded in the Public Records of Lake County, Florida.

IN WITNESS WHEREOF, Declarant has executed this instrument in the manner provided by law, on the day and year first above written. Signed, Sealed and Delivered in our presence as witnesses:

Witnesses

Owner/Partner/Corporation

1. _____
Signature

Type/Print Name of Witness

Signature

Type/Print Name

2. _____
Signature

Type/Print name of Witness

Signature

Type/Print Name

Type/Print Title/Position

**STATE OF FLORIDA
COUNTY OF LAKE**

The foregoing instrument was acknowledged before me this _____ day of _____, 20____,
by _____, who is personally known to me or who has produced
_____ as identification and who did _____ or did not _____ take an oath.

Notary Public (Signature)

(SEAL)

My Commission Expires: _____

To be completed by staff:
Unity of Title Application #: _____ Address #: _____