Ector County Health Department

221 N. Texas
Odessa, TX 79761
(432) 498-4141

Affidavit of Non-Rental RV/ Mobile Home Spaces
Permit #: _____

Location: _____

Legal description _____

Owner(s): _____

Name of Business: _____

Mailing address: _____

THE COUNTY OF ECTOR, STATE OF TEXAS

I/we _____ own the property

located at: _____

With a Legal Description of: _____

As the owner(s) of _____ I/we _____are fully
(Business Name) (Owner/s Name/s)
aware that the Recreational Vehicle/ Mobile Home spaces on the property are not for rent. I/we are providing these spaces free of any charge or compensation. Compensation may not be in the form of cash, check, charge, or other form of monetary exchange or exchange of property or services for service rendered.

If in the future, I/we _____ intend to create spaces for rent, I/we understand that I/we will need to complete a Manufactured Home and Rental Community application for submittal to and approval by the Ector County Commissioner's Court, prior to the intended conversion for use. I/we understand that if the use is changed without permission from the Ector County Health Department, we will revoke the property's OSSF permit.

WITNESS BY HAND(S) ON THIS ____ DAY OF _____, _____

_____ _____
Owner Signature Owner Signature

_____ _____
Owner Printed Name Owner Printed Name

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS ____ DAY OF _____, _____

_____
Notary Public, State of Texas

_____
Notary Printed Name

Commission Expires _____

*This Affidavit must be filed at the County Clerk's Office, and forwarded to the Ector County Health Department. This agreement transfers to the new owner(s) upon future sale of property