

**Candler Park Neighborhood Organization
Adjacent Neighbor Affidavit**

Applicant Name: _____

Applicant Address: _____

Application Number: _____

Date: _____

Signature below indicates that one has reviewed both the CPNO Zoning Committee Application and the drawings prepared by the applicant. Signatures may continue on back if needed.

Name	Address	Approve	Not Approve	Neither
Signature: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signature: _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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