

**CUSTOMARY BEACH USE AFFIDAVIT**

I, \_\_\_\_\_, am a resident of Nassau County, Florida and have been since \_\_\_\_\_.

I am providing photographs/documents that address the customary public use of the dry sand area in the unincorporated areas of the beach in Nassau County, Florida.

The photographs are from \_\_\_\_\_(month/year) to \_\_\_\_\_(month/year) and depict use by the public, on the dry sand areas of the unincorporated beaches (from \_\_\_\_\_ to \_\_\_\_\_) or are photographs indicating customary public use of unspecified dry sand areas in the unincorporated beach areas of Nassau County, Florida.

The documents (if applicable) are the following:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I obtained the photographs/documents from (indicate name of the individual or business):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My understanding of the dry sand area is the dry sand areas of the Atlantic Ocean beach landward of the mean high tide line to the dune or areas between the first two dune lines.

(If the Affidavit has photographs or other documents that address the customary public use of the dry sand areas, please attach the photographs/documents and send or email to Susan Gilbert, County Attorney’s Office, 96135 Nassau Place, Suite 6, Yulee, Florida 32097, [sgilbert@nassaucountyfl.com](mailto:sgilbert@nassaucountyfl.com).)

I understand that my affidavit may be used by the County in the formulation of an ordinance that will address the customary public use of the dry sand areas.

I authorize the use of this affidavit for the County’s customary public use determination as set forth in an ordinance.

Under penalties of perjury, I declare the above statements to be true to the best of my knowledge and belief.

Date: \_\_\_\_\_

Contact Information:

\_\_\_\_\_  
AFFIANT

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email Address

STATE OF FLORIDA  
COUNTY OF NASSAU

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2018 by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did take an oath.

\_\_\_\_\_  
Notary Public

State of Florida

My Commission expires: \_\_\_\_\_