



# Bethel Public Schools

1 School Street, P.O. Box 253, Bethel, CT 06801  
Fax: (203) 794-8723 – website: [www.bethel.k12.ct.us](http://www.bethel.k12.ct.us)

## NOTARIZED LANDLORD AFFIDAVIT

### Instructions:

Any applicant for Bethel Public Schools who cannot produce a lease agreement, whose lease is weekly or month-to-month, or whose lease is expired, is required to have the owner/management of the property where the applicant resides fill out this form and have his/her signature notarized. Affidavits will be verified for authenticity by the Bethel Board of Education. If you have any questions, please contact our District Registrar, Laurel McCollam at (203) 830-7355.

My name is \_\_\_\_\_ and I hereby depose and certify as  
*Property Owner/Management Representative's Name (please print)*

follows: I am the owner/manager of the property located at \_\_\_\_\_  
*Property Address (please print)*

in the Bethel school district.

\_\_\_\_\_, who is the parent or legal guardian of student,  
*Parent's/Guardian's Name (please print)*

\_\_\_\_\_, leases this property as his/her primary residence from me, without  
*Student's Name (please print)*

a written lease, in tenancy at will.

By signing below, I affirm that the above information provided is accurate. I authorize representatives from Bethel to verify this information, and I understand that falsification of any information may result in revocation of registration for the student(s).

**\*\*\*MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OFFICIAL ONLY\*\*\***

Print: \_\_\_\_\_  
*Property Owner/Management Representative's Name*

\_\_\_\_\_  
*Contact Phone Number*

Signed: \_\_\_\_\_  
*Property Owner/Management Representative*

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

Signed: \_\_\_\_\_  
*Notary Public Signature and Stamp*

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

*“Our Primary Purpose is to Improve Student Achievement.”*