

THE OSAGE NATION
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AFFIDAVIT FOR NEW INSTALLATION

I _____, whose primary residence is:

do hereby swear there is not an existing storm shelter/safe room at the residence listed.

FURTHER AFFIANT SAYETH NOT.

Signature _____ Date _____

{ State of _____ }

{ County of _____ }

On this _____ day of _____, 20____ before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared _____

_____ to me known to be the identical persons and acknowledged to me that they executed the same as their free and voluntary act and deed, for the used and purposes therein set forth.

Given under my hand and seal the day and year last above written.

NOTARY PUBLIC

My commission expires _____.

My commission number _____.