

CITY OF FORT MITCHELL

HARDSHIP AFFIDAVIT

I,, am the prop	erty owner of	_ (address),
Fort Mitchell, Kentucky. I hereby affirm under the penardships and am unable to pay my current property	enalty of perjury that I currently have one of th	
Unemployed		
Illness with Excessive Medical Bills		
Incarcerated		
Public Assistance Program Participant		
Other		
Attached is documentation that proves my hardship		
Signature		
Contact Information:		
Phone Number	Email Address	
STATE OF KENTUCKY, COUNTY OF KENTON		
Before me, a Notary Public in and fo , personall	or said County and State, hereby c ly known to me to be the affiant in the foregoi	•
personally appeared before me this day and having forth in the above affidavit are true and correct. W		

Notary Signature

Notary Printed Name

County

Notary ID & Expiration Date