DISTANCE REQUIREMENT
AFFIDAVIT

State of _____)
)
County of _____)

I, _____

do hereby state and affirm that there are no public or parochial schools, or principal campus of any college, university or seminary within 500 feet of: _____ located at _____.

_____

By:_____

Subscribed and sworn to before me this ___ day of _____, 20__.

_____
Notary Public

My commission expires: _____.