



## AFFIDAVIT TO ASSUME RESALE VIOLATIONS

To Whom It May Concern:

Let this be official acknowledgement that I/we as buyer(s) will assume the responsibility for the repairs/corrections listed in the City of Flat Rock re-sale inspection report for the property located at \_\_\_\_\_, Flat Rock MI 48134.

I/we understand a final inspection and certificate of occupancy must be obtained before occupancy. I/we will have all repairs/corrections completed and re-inspected within 60 days of closing on the property.

**\*NO OCCUPANCY IS PERMITTED UNTIL VIOLATIONS ARE CORRECTED AND RE-INSPECTED**  
**\*PERFORMANCE BOND REQUIRED AMOUNT DEPENDANT ON EXTENT OF REPAIRS**

Please check one which describes the future use of this property:

Owner Occupied       Rental Unit       Resale

Seller Printed Name: \_\_\_\_\_

Seller Signature: \_\_\_\_\_

Buyer Printed Name: \_\_\_\_\_

Buyer Signature: \_\_\_\_\_

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

Flat Rock City Hall Witness Signature or Notary Seal: \_\_\_\_\_

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**BUILDING DEPARTMENT USE ONLY**

Performance Bond Amount Required: \_\_\_\_\_