

Housing Services Division
100 State Street · Beloit, Wisconsin 53511 Phone (608) 364-6650 • Fax (608) 364-6609

AFFIDAVIT OF CONTINUING LAND CONTRACT

DATE: PROPERTY ADDRESS	:
TAX PARCEL NUMBER: The purpose of this form is to report to the City of Beloit that the unrecorded land contract for the above-listed property is still in full force and effect. We understand that because the land contract is not recorded that we have an obligation to report changes to the land contract or the ownership status of this property to the City of Beloit. Failure to do so may result in enforcement action under the Rental Dwelling Ordinance found in §14.06 of the Code of General Ordinances for the City of Beloit.	
Owner of Record:	Land Contract Purchaser:
Contact Person:	Contact Person:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone Number:	Phone Number:
State of)	State of
County of)	County of)
Under penalty of perjury, I hereby swear/affirm:	Under penalty of perjury, I hereby swear/affirm:
1. I am the owner of record for the property	I am purchasing the property listed in this
listed in this affidavit.	affidavit on land contract.
2. A land contract was signed by the parties on, 20	2. A land contract was signed by the parties on, 20
3. As of the date of this affidavit, the land	3. As of the date of this affidavit, the land contract
contract that was provided to the City on	that was provided to the City on
, 20 is still in full	, 20 is still in full force
force and effect.	and effect.
 The property listed in this affidavit is not being used rental property. 	4. I am occupying the property listed in this affidavit as my residence.
5. I acknowledge that should the status of the	5. I acknowledge that should the status of the
land contract agreement change, I must	land contract agreement change, I must
immediately notify the City of Beloit.	immediately notify the City of Beloit.
In witness whereof, under penalties of perjury, I hereby affix my signature this day of, 20	In witness whereof, under penalties of perjury, I hereby affix my signature this day of, 20
Signature of Owner of Record	Signature of Purchaser
Subscribed and sworn to before me this day of, 20	Subscribed and sworn to before me this day of, 20
Notary Public, County of, State of,	Notary Public, County of, State of,
My commission is permanent or expires:	My commission is permanent or expires: Form Revised 1/1/2013
	Form Revised 1/1/2013