

# WRITTEN STATEMENT

*For Unrelated Caregiver(s)*



I, \_\_\_\_\_, certify that I am the owner of the property located at \_\_\_\_\_ (known as the "Property") located in Arlington, Virginia. Pursuant to Arlington County Zoning Ordinance (ACZO) §12.9.8, I make the following statement:

The Caregiver Suite located at the above-referenced Property will be occupied by the following person(s) who is not related to me by blood or marriage:

(1) \_\_\_\_\_  
*Full Name*

(2) \_\_\_\_\_  
*Full Name*

One or more of the above-referenced persons will be providing care for the following:

- One or more children related to an occupant of the Property
- One or more elderly persons occupying the Property
- One or more disabled persons occupying the Property

\_\_\_\_\_  
*Signature of Owner*

\_\_\_\_\_  
*Printed Name of Owner*