## COMPLAINT TO REMOVE PERSONS UNLAWFULLY OCCUPYING RESIDENTIAL REAL PROPERTY

I,	the owner or authorized agent of the owner of the real property
located at	
declare unde	er the penalty of perjury that: (Initial next to each line)
	1. I am the owner / authorized agent (circle one) of the above listed real property (NOTE: if an
	agent of the property owner, documents evidencing authority to act on the property owner's
	behalf must be attached)
	2. The property was purchased on
	3. The property is a residential dwelling.
	4. An unauthorized person or persons have unlawfully entered and are remaining or residing
	unlawfully on this residential property.
	5. This residential property was not open to members of the public at the time the unauthorized
	person or persons entered.
	6. I have directed the unauthorized person or persons to leave the real property, but they have
	not done so.
	7. The person or persons are not current or former tenants pursuant to any valid lease
	authorized by the property owner, and any lease that may be produced by an occupant is
	fraudulent.
	8. The unauthorized person or persons sought to be removed are not an owner or a co-owner of
	the property and have not been listed on the title to the property unless the person or
	persons have engaged in title fraud.
	9. The unauthorized person or persons are not immediate family members of the property
	owner.
	10. There is no litigation related to the real property pending between the property owner and
	any person sought to be removed.

11. I understand that a person or persons r	removed from the property pursuant to this procedure
may bring a cause of action against n	ne for any false statements made in this complaint, or
for wrongfully using this procedure,	and that as a result of such action I may be held liable
for actual damages, penalties, costs, a	and reasonable attorney fees.
12. I am requesting the sheriff to immedia	ately remove the unauthorized person or persons from
the residential property.	
13. A copy of my valid government-issue	d identification is attached.
I HAVE READ EVERY STATEMENT MADE IN THIS P CORRECT. I ALSO ATTEST THAT ANY ATTACHN CORRECT, ARE VALID AND HAVE NOT BEEN ALTE MADE IN THIS PETITION ARE BEING MADE UNI PROVIDED IN SECTION 837.02, FLORIDA STATUTE	MENTS TO THIS DOCUMENT ARE TRUE AND ERED. I UNDERSTAND THAT THE STAREMENTS DER PENALTY OF PERJURY, PUNISHABLE AS
SIGNED THIS DAY OF	
OWN: STATE OF FLORIDA ) COUNTY OF PINELLAS)	ER/ AGENT OF REAL PROPERTY OWNER
	, personally known to me or who has produced no executed the foregoing and acknowledged that he executed the
Notary Signature Stamp:	
OR	
Before me this day personally appearedhis/her statements. Sworn and subscribed before me this	who, being duly sworn, attests to the truth of day of A.D.
	Deputy signs after administering oath.

Taken in my capacity as a law enforcement officer as defined in FSS 943.10 with the Pinellas County Sheriff's Office on authority of FSS 925.095.