

## **OFF-SITE STORAGE AFFIDAVIT**

\_\_\_\_\_, deposes and says:

1. She/He is \_\_\_\_\_ (title) of \_\_\_\_\_ (supplier) (the "Undersigned") doing business at \_\_\_\_\_, a Subcontractor under a certain Agreement dated the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in connection with \_\_\_\_\_ (name of project owner) and that the materials listed in the attached Bill of Sale are now stored at the following location,  
\_\_\_\_\_.
2. The Undersigned has transferred to Contractor and Owner clear, marketable title to the materials, and they are not subject to any security interest or encumbrance.
3. The materials are stored in a safe and secure manner so as to preclude damage by the elements, theft or vandalism.
4. The materials are available now for inspection by the Contractor and Owner or their representatives.
5. The materials are now covered by all risk insurance coverage for in-transit and stored materials. The insurance is in the name of the Contractor and Owner as named insured, as their interest may appear. The insurance is in an amount not less than 100% of the value of the material. The cost of such insurance has been borne by the Undersigned and shall remain in force until the material is transported to the project site.
6. The materials have been purchased or manufactured for the specific purpose of being used in the construction of the Project, are in accordance with the contract documents, and will be transported to the site at the Undersigned's expense.
7. The materials will remain on the premises until delivery to the above project site, except in an emergency that threatens the materials.
8. The Undersigned makes this affidavit in order to induce Owner to pay for such material.
9. The materials are stored in a ☐ Non-Bonded Warehouse facility.
10. The materials are stored in a ☐ Bonded Warehouse facility.

\_\_\_\_\_  
(Supplier)

By: \_\_\_\_\_  
(Signature)

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
(notary name printed)

\_\_\_\_\_  
(Commission number)