**For Feeding the Homeless for Bona Fide Religious Motivations**

**Application for Fee Waiver**

Section 250.123 (k) – (l) (1) - Ordinance Code, authorizes the Office of Consumer Affairs manager to waive permit fees for applicants/individuals who submit an affidavit stating that it is made under oath and under penalty of perjury and that the applicant believes the subject feeding activity’s purpose is exclusively or primarily for bona fide religious motivations, and or First Amendment speech or expression purposes, and that the Applicant has determined that the cost for the permit is so financially burdensome that it would constitute an unreasonable restriction on the right of First Amendment activity, belief or expression or it would be impossible due to the solvency or indigence of the Applicant to conduct the purpose feeding event.

**Jacksonville Ordinance Code Chapter Section 250.123(1)(1)** states the Applicant shall file an affidavit, stating it is made under oath and under penalty of perjury, and the Applicant believes the subject feeding activity's purpose is exclusively or primarily for bona fide religious motivations, OR for First Amendment speech or expression purposes, AND the Applicant determines the cost for the permit is so financially burdensome, it would constitute: 1) an unreasonable restriction on the right of First Amendment activity, belief, or expression, OR; 2) it has been or would be impossible, due to insolvency or indigency of the Applicant to conduct the proposed feeding event or activity for the group of homeless individuals anticipated to attend if the permit fee is not waived.

In accordance with Jacksonville Ordinance Code Chapter Section 25.123 (k), I request the city of Jacksonville to waive the Feed the Homeless Application fee:

Name of Requesting Organization/Individual \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Jacksonville Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Address: (National or State): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Waiver Approved/Denied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Consumer Affairs Manager/Representative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AFFIDAVIT**

I, the undersigned and having authority to act on behalf of the individual or organization submitting this application, hereby swear under oath and under penalty of perjury, that the representations and statements contained herein are true, correct and complete to the best of my knowledge. Any false representations, misleading information or omission of any material fact may be grounds for suspension and/or revocation of any permit issued hereafter.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTARY STAMP**