

IN THE COUNTY COURT, IN AND FOR
SANTA ROSA COUNTY, FLORIDA
[insert county in which rental property is located]

[insert name of Landlord]
Plaintiff,
vs.

[insert name of Tenant]
Defendant. /
CASE NO. _____

[insert case number assigned
by Clerk of the Court]

AFFIDAVIT OF DAMAGES

STATE OF FLORIDA)
COUNTY OF)

BEFORE ME, the undersigned authority, personally appeared _____ [name] who
being first duly sworn, states as follows:

1. I am ____ the Plaintiff or ____ the Plaintiff's agent (check appropriate response) in this case and am authorized to make this affidavit.
2. This affidavit is based on my own personal knowledge.
3. Defendant has possession of the property which is the subject of this eviction under an agreement to pay rent of \$ _____ [rental amount] per _____ [week, month, or other payment period].
4. Defendant has not paid the rent due since _____ [date of payment Tenant has failed to make].
5. Defendant owes Plaintiff \$ _____ [past due rent amount] as alleged in the Complaint plus interest.
6. Defendant owes Plaintiff \$ _____ [amount of other damages] as alleged in the Complaint plus interest.

Name: _____

Sworn and subscribed before me on _____ [date], by
_____ (name), who _____ is personally known to me/ _____ produced
_____ [document] as identification and who took an oath.

NOTARY PUBLIC-STATE OF FLORIDA

Name: _____

Commission No. _____

My Commission Expires: _____

I CERTIFY that I ____ mailed, ____ faxed and mailed, or ____ hand delivered a copy of this motion and attached affidavit to the Defendant at

_____ [insert address at which Tenant was served and fax number if sent by fax].

Approved for use under rule 10-2.1(a) of
the Rules Regulating The Florida Bar
The Florida Bar 2010
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