



**GUILFORD COUNTY
PLANNING AND DEVELOPMENT**

**FRO Addendum 2,
Multiple Parties**

Continued from *Part B Item 1 of the Financial Responsibility/Ownership Form* for multiple parties.
Attach copies of this page as needed to list all financially responsible parties.

Company Information

Company Name: _____
Name: _____
Mailing Address: _____
City, State, Zip: _____
Street Address: _____
City, State, Zip: _____
Phone: _____
Email: _____
Fax: _____

Signature _____

The above information is true and correct to the best of my knowledge and belief and was provided by me under oath. (This form must be signed by the Financially Responsible Person if an individual(s) or his attorney-in-fact, or if not an individual, by an officer, director, partner, or registered agent with the authority to execute instruments for the Financially Responsible Party). I agree to provide corrected information should there be any change in the information provided herein.

Print name Title or Authority

Signature Date

I, _____, a Notary Public of the County of _____

State of North Carolina, hereby certify that _____ appeared personally before me this day and being duly sworn acknowledged that the above form was executed by him/her.

Witness my hand and notarial seal, this _____ day of _____, 20____

Notary Public

My Commission Expires _____

(Seal)