



GROWTH MANAGEMENT DEPARTMENT
 205 North Marion Ave, Lake City, FL 32055
 Phone: 386-719-5750
 E-mail: growthmanagement@lcfla.com

AGENT AUTHORIZATION FORM

I, Rhett Holmes (owner name), owner of property parcel

number 00-00-00-12673-000 (parcel number), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the owner, or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are authorized to sign, speak and represent me as the owner in all matters relating to this parcel.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dennille Decker</u>	1. <u>Dennille Decker</u>
2.	2.
3.	3.
4.	4.
5.	5.

I, the owner, realize that I am responsible for all agreements my duly authorized agent agrees with, and I am fully responsible for compliance with all Florida Statutes, City Codes, and Land Development Regulations pertaining to this parcel.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

Owner Signature (Notarized) [Signature] Date 2/16/22

NOTARY INFORMATION:
 STATE OF: GEORGIA COUNTY OF: Lowndes

The above person, whose name is Rhett Holmes, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 16 day of February, 2022.

NOTARY'S SIGNATURE Laurie A. Jarvis

