

STATE OF FLORIDA

COUNTY OF COLUMBIA Sabra O'quinn

LAND OWNER AFFIDAVIT

This is to certify that I/We, Sabra O'Quinn
(Property Owners Name or State Corporation Name (include Corp Officer) as it appears on Property Appraiser)

as the owner of the below described property:

Property Tax Parcel ID # 04013-001

Subdivision _____
(Name, Lot, Block, Phase)

Give my permission for Scott Fleming to place a:
(Name of person authorized by owner to sign as owner or place structure - NOT CONTRACTOR OR COMPANY NAME)

Select one: Mobile Home Travel Trailer(RV) Utility Pole Only Barn Shed
 Single Family Home Right-of-Way Garage Other(specify): _____

I (We) understand that the named person(s) above will be allowed to receive a building permit on the parcel number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on the property.

Sabra O'quinn

Printed Name of Signor

Signature

Date

May 6th, 2026

Printed Name of Signor

Signature

Date

Printed Name of Signor

Signature

Date

Sworn to and subscribed before me on this 6th day of May, 2026

and is personally known or produced the following ID: Drivers License

Robin Byrd
Printed Name of Notary

Robin Byrd
Signature

Notary Stamp:

