

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Northern Alachua Holdings LLC,
(State Corporation Name as it appears on the Property Appraisers Office website)
as the owner of the below described property:

Property tax Parcel ID number 23-75-16-04298-020

Subdivision (Name, lot, Block, Phase) _____

Give my permission for Katie Knight to place a
(Name of person authorized to pull permit)

Circle one - Mobile Home Travel Trailer / Utility Pole Only / Single Family Home /
or more - Barn - Shed - Garage / Culvert / Other _____

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

[Signature]
Owner Signature

08/25/23
Date

Owner Signature

Date

Owner Signature


Date

Sworn to and subscribed before me this 25th day of August, 2023, by
 physical presence or _____ online notarization and this (these) person(s) are
personally known to me _____ or produced ID driver license

[Signature]
Notary Public Signature

Quang Pham
Notary Printed Name

Notary Stamp/

 QUANG PHAM
Notary Public
State of Florida
Comm# HH238913
Expires 3/10/2026



COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Daniel Hall, give this authority for the job address show below
Installer License Holder Name

only, 488 SW Don Cook Way, Ft White FL, and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
Shelby Mitchell	<i>Shelby Mitchell</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
Katie Knight	<i>Katie Knight</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner
		<input type="checkbox"/> Agent <input type="checkbox"/> Officer <input type="checkbox"/> Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

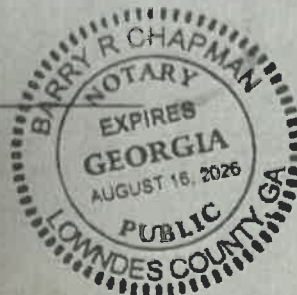
Daniel Hall License Holders Signature (Notarized) 1H1144605 License Number 8/25/23 Date

NOTARY INFORMATION:

STATE OF: Florida Georgia COUNTY OF: Lowndes

The above license holder, whose name is Daniel Hall, personally appeared before me and is known by me or has produced identification (type of I.D.) _____ on this 25th day of August, 2023.

[Signature]
 NOTARY'S SIGNATURE



(Seal/Stamp)