

STATE OF FLORIDA
COUNTY OF COLUMBIA

_____, the Owner of the parcel which is being used to place an additional dwelling (mobile home) as a primary residence for a family member of the Owner, Sherri Howland _____, the Family Member of the Owner, and who intends to place a mobile home as the family member's primary residence as a temporarily use. The Family Member is related to the Owner as Mother _____, and both individuals being first duly sworn according to law, depose and say:

3. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference with the Columbia County Property Appraiser Tax Parcel No. 19-4s-16-03062-212

5. This Affidavit and Agreement is made for the specific purpose of inducing Columbia County to issue a Special Temporary Use Permit for a Family Member on the parcel per the Columbia County Land Development Regulations. This Special Temporary Use Permit is valid for _____ year(s) as of date of issuance of the mobile home move-on permit, then the Family Member shall comply with the Columbia County Land Development Regulations as amended.

6. This Special Temporary Use Permit on Parcel No. 19-4s-16-03062-212 is a "one time only" provision and becomes null and void if used by any other family member or person other than the named Family Member listed above. The Special Temporary Use Permit is to allow the named Family Member above to place a mobile home on the property for his primary residence only. In addition, if the Family Member listed above moves away, the mobile home shall be removed from the property within 60 days of the Family Member departure or the mobile home is found to be in violation of the Columbia County Land Development Regulations.

7. The site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building.

8. The parent parcel owner shall be responsible for non ad-valorem assessments.

9. Inspection with right of entry onto the property, but not into the mobile home by the County to verify compliance with this section shall be permitted by owner and family member. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section.

10. The mobile home shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.

11. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).

12. Upon expiration of permit, the mobile home shall be removed from the property within six (6) months of the date of expiration, unless extended as herein provided by Section 14.10.2 (#7).

13. This Affidavit and Agreement is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the facts represented by us in this Affidavit are true and correct and we accept the terms of the Agreement and agree to comply with it.

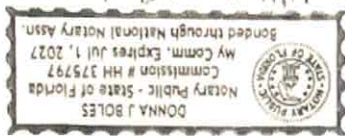
Sherril Howland
Family Member

Sherril Howland
Owner

Sherril Howland
Typed or Printed Name

Sherril Howland
Typed or Printed Name

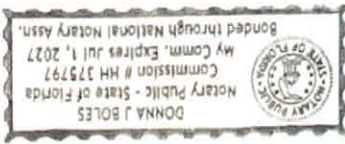
Subscribed and sworn to (or affirmed) before me this 14th day of September, 2023, by Kris Howland (Owner) who is personally known to me or has produced as identification.



Subscribed and sworn to (or affirmed) before me this 14th day of September, 2023 by Sherril Howland (Family Member) who is personally known to me or has produced as identification.

Donna J. Boles
Notary Public

COLUMBIA COUNTY, FLORIDA



By: _____
Name: _____
Title: _____