

This is to certify that I/We, Abigail Hermesman
(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 # 16-4s-16-03041-030

Subdivision _____
(Name, Lot, Block, Phase)

Give my permission for Christopher Hancock 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.

Abigail Hermesman
Printed Name of Signor

Abigail Hermesman
Signature

12-3-25
Date

Printed Name of Signor

Signature

Date

Printed Name of Signor

Signature

Date

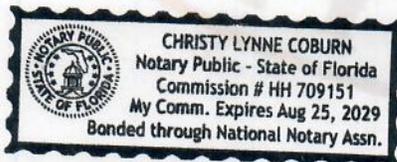
Sworn to and subscribed before me on this 3rd day of December, 2025

and is personally known or produced the following ID: DL

Christy Lynne Coburn
Printed Name of Notary

Christy Lynne Coburn
Signature

Notary Stamp:



STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I/We, Christopher Hancock
(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 # 16-4s-16-03041-030

Subdivision _____
(Name, Lot, Block, Phase)

Give my permission for Abigail Hermesman 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.

Christopher Hancock
Printed Name of Signor

[Signature]
Signature

12/13/25
Date

Printed Name of Signor

Signature

Date

Printed Name of Signor

Signature

Date

Sworn to and subscribed before me on this 3rd day of December, 2025

and is personally known or produced the following ID: DL

Christy Lynne
Printed Name of Notary

Christy Lynne Coburn
Signature

Notary Stamp:

