This is to certify that I, (We), Lemy Under (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 number 20.35.16-02192-003
Subdivision (Name, Lot, Block, Phase)
Give my permission for Paul Uidean to place a
(Name of person authorized to sign as owner or place a structure) Select one: Mobile Home Travel Trailer Utility Pole Only Single Family Home
OBarn OShed OGarage OCulvert OOther (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 this property.
Serry L Videon Jan 1 Videon Signardre 5/22/25 Printed Name of Signor Bignardre Date
Printed Name of Signor Signature Date
Printed Name of Signor Signature Date Sworn to and subscribed before me this 22 day of May ,2025 by
known to me or produced ID
Broderick Pack
Printed Name of Notary Signature
Notary Stamp BRODERICK D PACK Notary Public - State of Florida Commission # HH 163068 My Comm. Expires Aug 9, 2025 Bonded through National Notary Assn. Created 12/202