

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Devane Payne,
(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 26-35-16-02308-008

Subdivision (Name, Lot, Block, Phase) Fairway View Lot 17

Give my permission for Lynne Boyd 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

☐ Barn ☒ Shed ☐ Garage ☐ Culvert ☐ Other (specify) Shingle Shop roof

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.

Devane Payne
Printed Name of Signor

X Devane Payne
Signature

11/13/24
Date

Lynne Boyd
Printed Name of Signor

X Lynne D Boyd
Signature

11/13/24
Date

Printed Name of Signor

Signature

Date

Sworn to and subscribed before me this 13 day of Nov, 2024 by

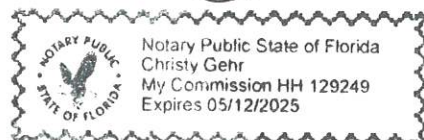
✓ physical presence or _____ online notarization and this (these) person(s) are personally

known to me ✓ or produced ID ID.

Christy Gehr
Printed Name of Notary

Christy Gehr
Signature

Notary Stamp



Created 12/2023