

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Linda Gilyard,
(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 25-55-15-00478-110

Subdivision (Name, Lot, Block, Phase) Daisy Estates Lot 10

Give my permission for Shala Gilyard 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) _____

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.

Linda Gilyard ✓ Linda R. Gilyard 09/03/2025
Printed Name of Signor Signature Date

Printed Name of Signor Signature Date

Printed Name of Signor Signature Date

Sworn to and subscribed before me this 3 day of September, 2025 by

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

known to me _____ or produced ID DL.

Broderick Pace
Printed Name of Notary

[Signature]
Signature

Notary Stamp



BRODERICK D. PACE
Commission # HH 662366
Expires August 9, 2029

Created 12/2023

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COUNTY OF COLUMBIA

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(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) _____

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.

Shala L. Gilyard
Printed Name of Signor

Shala L. Gilyard
Signature

9/3/25
Date

Printed Name of Signor

Signature

Date

Printed Name of Signor

Signature

Date

Sworn to and subscribed before me this 3 day of September, 2025 by

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

known to me _____ or produced ID DL.

Broderick Pack
Printed Name of Notary

[Signature]
Signature

Notary Stamp



BRODERICK D. PACK
Commission # HH 662366
Expires August 9, 2029

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