This is to certify that I, (We), Kautz, Michael & Robin		
(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 36-4S-16-03338-000 (16402) Subdivision (Name, Lot, Block, Phase) LOT 13 FAIRWAY VIEW UNIT 4.		
Give my permission for COMM NE COR OF NW1/4 OF SW1/4 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) Re-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.		
Michael Kautz Printed Name of Signor Signature	ael Kautz	6(28/27) Date
Robin Kautz	Karotof .	Date
Printed Name of Signor Signature		Date
Printed Name of Signor Signature	· · ·	Date
Sworn to and subscribed before me this as day of and , 2025 by		
physical presence or online notarization and this (these) person(s) are personally		
known to me or produced ID Driver License		
Patricia la Stallal Signature Notary Stances		
Notary Stamp Notary Public St	ate of Florida	