This is to certify that I, (We), Robert Sanchez and Maria Rial Bermudez,		
(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 18-4S-17-08447-000 (App # 69322)		
Subdivision (Name, Lot, Block, Phase)		
Give my permission for Scott Co	son authorized to sign as owner or place a structure)	to place a
Select one: Mobile Home Travel Trailer Utility Pole Only Single Family Home		
OBarn OShed OG	arage Oculvert Oother (speci	ify)
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.		
waste and the protection services lev	icu on uns property.	
Robert Sanchez		7/1/2025
Printed Name of Signor	Signature	Date
Maria Ria <mark>l Bermudez</mark>	1/	
Printed Name of Signor	Signature	Date Date
Printed Name of Signor	Signature	Date
Sworn to and subscribed before me the	nis day of,	, 20 by
physical presence or online notarization and this (these) person(s) are personally		
known to me or produced ID		
Printed Name of Notary	Neonta Ander Signature	500
V **		

Notary Stamp

