

STATE OF FLORIDA
COUNTY OF COLUMBIA

LAND OWNER AFFIDAVIT

This is to certify that I, (We), Timberlane Mobile Home Community, LLC.
Patti Goodson
as the owner of the below described property:

Property tax Parcel ID number 09-45-16-02818-002

Subdivision (Name, lot, Block, Phase) Timberlane M# Community, LLC.

Give my permission for Janice Ely to place a

Circle one Repairs to Mobile Home / Travel Trailer / Utility Pole Only / Single Family Home.

I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.

X _____ Date 5/20/13
Owner Signature

Owner Signature Date

Owner Signature Date

Sworn to and subscribed before me this _____ day of _____, 20____. This
(These) person(s) are personally known to me or produced ID _____
(Type)

Notary Public Signature Notary Printed Name

Notary Stamp/

Thanks Patti,

Please fax back to 386-758-2160

Laurie

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