This is to certify that I, (We), Tiffa	ney M. Morelan	
(Property O	wners Name or State Corporation Name (include C	orp Officer) as it appears on Property Appraiser)
as the owner of the below described		
Property tax Parcel ID number 14-3	5s-15-00459-305	
Subdivision (Name, Lot, Block, Phase)	SIMC	
Give my permission for Kelsea L		to place a
Select one: Mobile Home OTra	rson authorized to sign as owner or place a structur evel Trailer OUtility Pole O	
	arage OCulvert OOther	
		(opcorry)
I (We) understand that the named per on the parcel number I (we) have list waste and fire protection services lev	ed above and this could resul	
Tiffaney M. Morelan	(ch	119/2025
Printed Name of Signor	Signature	Date
Printed Name of Signor	Signature	Date
Timed Ivaine of Signor	Signature	Date
Printed Name of Signor	Signature	Date
Sworn to and subscribed before me t	his day of	, 20 by
physical presence or onlin	ne notarization and this (these) person(s) are personally
known to me or produced ID		
Christylynne Cablum Printed Name of Notary	Christy Lynne. Signature	Coburn
Notary Public - Commission	NNE COBURN State of Florida # HH 169705 res Aug 25, 2025 onal Notary Assn.	Created 12/2023