

## NOTARIZED AUTHORIZATION OF OWNER

I/We Susan McCaskill as the sole or join fee

*Print Owner's Name(s)*

simple title holder(s) of the property described as (parcel number and legal description): \_\_\_\_\_

See Attachment A

authorize \_\_\_\_\_ to act as my agent to seek a (select one)

☐ conditional use; ☐ rezoning; ☐ variance, or ☒ other <sup>Subdivision Exempt</sup>, on the above referenced property.

Property Address: \_\_\_\_\_

Susan T. McCaskill  
Owner's Signature

Susan T. McCaskill  
Print or Type Name

Date: 10.27.2021

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Print or Type Name

Date: \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF VOLUSIA

The foregoing instrument was acknowledge before me this 27 day of Oct, 2021, by \_\_\_\_\_,  
who is personally known to me or who has produced \_\_\_\_\_ as identification and who (did/did not) take an oath.

Denise  
Notary Public – State of Florida

(Notary Seal or Stamp)

Denisse Kindl  
Print or Type Name

