

**SPECIAL EXCEPTION APPLICATION
LEVY COUNTY, FLORIDA**

Section X. CERTIFICATION

The undersigned has read and understands the application, and has received, read and understands the submittal requirements. It is agreed and understood that the undersigned will be held responsible for the accuracy of the application and information submitted. The undersigned hereby attests to the fact that the parcel number (s) and legal description (s) provided is/are the true and proper identification of the area of which the petition is being submitted. Signatures of all owners or their agents are required on this form. Signatures by other than the owner (s) will be accepted only with notarized proof of authorization by the owner (s).

Owner of Record

Name: Ryan Thomas

Address: 11151 N.E. 35th St., Bronson, FL 32621

Phone: (352) 258-9547

Owner of Record

Name: Lee A. Thomas

Address: 4990 N.E. 195th Ct., Williston, FL 32696

Phone: (352) 258-9547

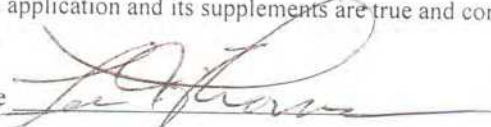
No person submitting an application may rely upon any comment concerning a proposed amendment, or any expression of any nature about the proposal made by any participant, at any pre-application conference as a representation or implication that the proposal will be ultimately approved or rejected in any form. To meet with staff to discuss the proposal, please call (352) 486- 5203 for an appointment.

OWNER VERIFICATION

I hereby certify that the information contained in this application and its supplements are true and correct, and that I am the legal owner of the above described property.

Date: 5/16/2023

Owner Signature



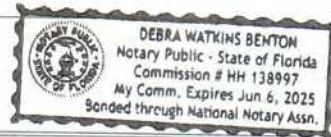
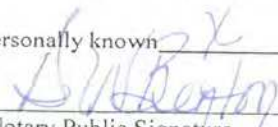
STATE OF FLORIDA
COUNTY OF Levy

Sworn to and scribed before me this 16 Day of May 2023, by (name)

Personally known X

Identification Expiration Date: _____

Notary Public Signature

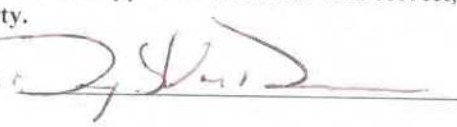


AGENT VERIFICATION

I hereby certify that the information contained in this application and its supplements are true and correct, and that I am the authorized agent of the above described property.

Date: 5/16/2023

Authorized Agent Signature



STATE OF FLORIDA
COUNTY OF Levy

Sworn to and scribed before me this 16 Day of May 2023, by

Signature – Notary Public



Personally known X

Identification Expiration Date _____

