(For property that is owned by multiple interests, please use a separate form for each owner.)

AUTHORIZATION AS OWNER'S REPRESENTATIVE LEE COUNTY CONSERVATION 20/20 LAND PROGRAM

	is hereby authorized by the undersigned
(Print name)	
property owner(s) as a duly appointed	d representative for property described as:
Parcel Tax STRAP No(s).:	
Address/Site Location:	
	Signature of Owner
	Print name
	Signature of Owner
INDIVIDUAL CAPACITY	Print name
STATE OF	
COUNTY OF	
SWORN TO AND SUBSCRIBED bef	ore me this day of, 20 by
(name of person acknowledged)	
(SEAL)	(Notary Signature)
	(Print, type or stamp name of Notary)
	Personally known OR Produced Identification Type of Identification

CORPORATE CAPACITY	
STATE OF	
COUNTY OF	
SWORN TO AND SUBSCRIBED before n	ne this day of, 20 by
	agent) of of
(name of officer or agent, title of officer or	agent) (name of
	a corporation, on
behalf of the corporation/LLC/Trust.	
(SEAL)	(Notary Signature)
	(Print, type or stamp name of Notary)
	Personally known OR Produced Identification Type of Identification
	My Commission Expires