

## IDENTIFICATION:

Isaiah A. McFall — Son of Gerald & Deborah McFall

Alyson McFall — Wife of Isaiah A. McFall

Chelsea R. Fouraker (McFall) — Daughter of Gerald & Deborah McFall

Clinton Fouraker — Husband of Chelsea R. Fouraker

These four Individuals / two Couples are being deeded a 5+ acre parcel each

Gerald & Deborah McFall — Parent Tract Parcel #34-3N-25-0000-0004-0000

Planning and Zoning Section Approval Date:	
Parcel/Strap#	
Approved by:	Δ :MC :
INDIVIDUAL FAMILY MEMBER	R AFFIDAVIT FOR A FAMILY HARDSHIP DEVELOPMENT
	•
I, Chelsen & Clinton For	RAK certify that I am the proposed owner of the following property
located in Nassau County, Florida:	
Parcel ID Number	
Acreage: SACRES	• • • • • • • • • • • • • • • • • • •
I further certify that the proposed location	n is to become my primary residence and that I understand the allowance
	1 3.1.6 of Ordinance No. 99-18, as amended, and is based on certain
	ancy limited to the primary residence of name above, (2) I must meet all
	ring, (3) no building permit may be issued on the parcel except to myself,
	of land. It is my responsibility to disclose the above stated limitations
to any future owners of the property.	or land. It is my responsibility to disclose the above stated immittations
• • • •	
This form is also to certify that I April	sent & Clienton Foul Aleskam an immediate family member:
(circle one) parent step-parent adopted	parent, spouse, brother, sister child step-child, grandchild, of the
certified property owner of aforemention	ned property located in Nassau County.
Mada Co	
Mille FORTARIZ	Chelsen Fouraker
Signature of qualifying immediate family	
- 1/1 // // /////////////////////////	Cool A MCEA!
COMM MININ	GEACATOR A. MICHALL
Signature of the Property Owner /	Print Name
(This form must be notarized)	
	• € eres (
The applicant states, under oath, that she	/he has read and understands the instructions and submission
requirements stated in the application att	ached as Exhibit A.
	nation contained in this application and its supplements are true and
correct, and that I am the legal owner or	authorized agent of the above described property.
	11/1/1/1/21 1/1/21 Mg. 1/16/21
Applicant/Owner(s) Signature	MAMME Vietoral JAVIII Date 1/16/2
G. CDI II G. COL	1: 1/1 C Taylor D. 1 202/
	d and sworn before me on this 16 day of JANUARY, 2021
By Gersiel Metrill	
Identification verified:	
Notary Signature:	
My commission opires:	
	TROYA ARNOLD

Note: For purposes of this provision, "improved the state of the purposes of this provision, "improved the state of the purposes of this provision, "improved the state of the purposes of this provision, "improved the purposes of the purposes of this provision, "improved the purposes of the purposes of the purposes of this provision, "improved the purposes of the p

Planning and Zoning Section Approval	<b>7</b>
Date:	
Parcel/Strap#	
Approved by:	
INDIVIDUAL FAMILY MEMBE	R AFFIDAVIT FOR A FAMILY HARDSHIP DEVELOPMENT
I, FAIR & Alyson MEFR located in Nassau County, Florida:	certify that I am the proposed owner of the following property
Parcel ID Number	
Acreage: SACRES	
of this additional unit is within Section requirements and limitations: (1) occupa land development regulations for permit	in is to become my primary residence and that I understand the allowance in 3.1.6 of Ordinance No. 99-18, as amended, and is based on certain ancy limited to the primary residence of name above, (2) I must meet all ting, (3) no building permit may be issued on the parcel except to myself, of land. It is my responsibility to disclose the above stated limitations
(circle one) parent, step-parent, adopted certified property owner of aforemention	ISAINH MCFALL
Signature of qualifying immediate famil	y member Print Name
	GERALD A. MEFA!
Signature of the Property Owner	Print Name
(This form must be notarized)	38
The applicant states, under oath, that she requirements stated in the application at	e/he has read and understands the instructions and submission tached as Exhibit A.
I hereby state, under oath, that the inform	nation contained in this application and its supplements are true and
correct, and that I am the legal owner or	authorized agent of the above described property.
Applicant/Owner(s) Signature	Milled Defort J. M. Follbate . 1/16/21
State of Florida, County of Nassau signe By Gerald ME (A)	ed and sworn before me on this // day of JANVARY, 20 V
Identification verified:	
Notary Signature:	
My commission expires:	TROYA. ARNOLD MY COMMISSION # HH 026332 EXPIRES: October 1, 2026
Note: For purposes of this provision, "immedia (b) spouse; (c) brothers or sisters; (d) children, s	
adopted parent, siblings, and children, step-child	lren, adopted children, or grandchildren of the Owner's spouse. I further certify that gal portion thereof as their primary residence as shown on the attached site plan.