



PETITION FOR REVIEW

AFFIDAVIT TO AUTHORIZE AGENT FOR A PETITION FOR REVIEW

Multiple authorizations may be necessary if there is more than one property owner.

APPLICATION/RECORD NUMBER: _____

PROPERTY (LOCATION) ADDRESS(ES): 2312 GRACE ST

"That I am (we are) the owner(s) and record title holder(s) of the property/Petitioner noted herein"

Petitioner's Name(s): STEPHEN MICHELINI / STEPHEN BARNES

"That this property constitutes the subject of an application for the above referenced application/record number."

I, THE UNDERSIGNED owner, HEREBY CERTIFY THAT ALL INFORMATION ON THIS PETITION IS TRUE AND COMPLETE AND HEREBY AUTHORIZE AND ALLOW REPRESENTATIVES OF THE CITY TO ACCESS THE PROPERTY UNDERGOING REVIEW FOR THE ABOVE REFERENCED REQUEST. IF MY PROPERTY IS GATED, I WILL PROVIDE ACCESS TO THE PROPERTY UPON REQUEST FROM THE CITY. I ALSO CONSENT TO THE POSTING OF A SIGN ON MY PROPERTY IF THERE IS A THIRD-PARTY SUBMITTAL OF A PETITION FOR REVIEW.

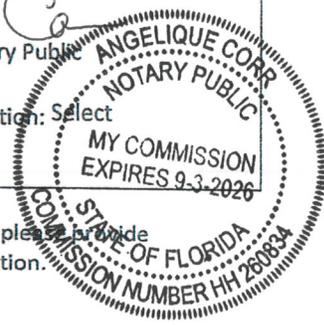
"That this affidavit has been executed to induce the City of Tampa, Florida, to consider and act on the above described application and that the undersigned has(have) appointed and does(do) appoint the agent(s) stated herein as his/her(their) agent(s) solely to execute any application(s) or other documentation necessary to affect such application(s)" (if applicable).

AGENT'S/FIRM NAME: STEPHEN MICHELINI

The undersigned authorizes the above agent/firm (s) to represent me (us) and act as my (our) agent(s) at any public hearing on this matter (if applicable).

The undersigned authorizes the above agent(s) to agree to any conditions necessary to effectuate this application. Both owner/petitioner and agent must sign and have their names notarized.

<p>STATE of FLORIDA COUNTY of <u>HILLSBOROUGH</u></p> <p>Sworn to (or affirmed) and subscribed before me by means of <u>physical present</u> or online notarization, this <u>1st</u> day of <u>Dec</u>, 202<u>5</u> by</p> <p>Stephen Barnes _____ Printed Name Signature</p> <p>_____ Signature and Stamp of Notary Public</p> <p>Personally known or produced identification: <u>Select</u></p> <p>Type of identification</p>	<p>STATE of FLORIDA COUNTY of <u>HILLSBOROUGH</u></p> <p>Sworn to (or affirmed) and subscribed before me by means of <u>physical present</u> or online notarization, this <u>1st</u> day of <u>Dec</u>, 202<u>5</u>, by</p> <p>_____ Printed Name Signature</p> <p><u>STEPHEN MICHELINI</u> Signature and Stamp of Notary Public</p> <p>Personally known or produced identification: <u>Select</u></p> <p>Type of identification</p>
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* If the applicant/owner is a corporation, trust, LLC, Professional Association or similar type of arrangement, please provide documentation from the corporation, trust, etc., indicating that you have the ability to authorize the application.

