

LIMITED POWER OF ATTORNEY (LPOA)

This limited power of attorney (LPOA) is conveyed expressly for and limited to the real property located at _____.

Strap number _____

Please read carefully before signing. This form must be completed in full and will only be accepted with original signatures.

I hereby authorize **Clark Richards** to be my agent and attorney-in-fact to conduct all transactions, except as limited below, regarding the obtaining of building permits, certificate(s) of use, completion and occupancy, hazardous waste exemption(s), zoning and licensing approvals and license transfers for any and all businesses, persons or entities listed and following: _____

_____ as though he was the owner / officer, member or managing member, for the real property owners and / or business entities described above.

This LPOA will remain in effect until Clark Richards or Board of County Commissioners, Lee County, Florida has received written notice of revocation from the property owner named above. The property owner and / or signor agrees to indemnify and hold harmless Clark Richards & Associates and Board of County Commissioners, Lee County, Florida its affiliates, officers, employees and/or Custodian, against all claims, actions, costs and liabilities, including attorneys' fees, arising out of or relating to their reliance on this LPOA.

This indemnity and hold harmless provision shall survive any Termination of this LPOA.

Signed _____ Date _____
Printed name: _____

Name: _____
Address: _____
C,S,Z _____

Before me personally appeared _____ who is known to me or produced (type of ID)

_____ this _____ day of _____, 20_____.

SEAL

Notary

Signature must be verified by a Notary Public.

Signature of Attorney-in-Fact _____ Date _____
Clark Richards