**JOINDER AND CONSENT OF {{TYPE OF ENCUMBRANCE,**

**E.G., EASEMENT}} HOLDER**

KNOW ALL MEN BY THESE PRESENTS:

**THAT {{ENCUMBRANCE HOLDER}},** {{if applicable A MUNICIPAL CORPORATION CREATED AND EXISTING UNDER THE LAWS OF THE STATE OF FLORIDA}}, whose mailing address is {{ADDRESS}} (hereinafter “{{TYPE OF ENCUMBRANCE}} Holder”), hereby certifies that it is the holder of that certain {{TYPE OF ENCUMBRANCE}} dated {{DATE}}, and recorded {{DATE}}, in Official Records Book {{NUMBER}}, at page {{NUMBER}}, of the Public Records of {{COUNTY NAME}} County, Florida, which encumbers the property described on Exhibit “A” attached hereto and incorporated herein, owned by {{OWNER}} (hereinafter “Owner”). The {{TYPE OF ENCUMBRANCE}} Holder hereby joins in and consents to the granting of the Declaration of Restrictive Covenant {{*if RC was previously recorded, insert:* dated {{INSERT DATE}} and recorded *{{DATE RECORDED}}*, in Official Records Book *{{BOOK NUMBER}}*, at page *{{NUMBER}}*, in the Public Records of *{{COUNTY}}* County, Florida}} by the Owner to the Florida Department of Environmental Protection.

IN WITNESS WHEREOF, this Consent and Joinder is executed by the undersigned this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

WITNESSES: {{ENCUMBRANCE HOLDER}}

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (CORPORATE SEAL, IF ANY)

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_

COUNTY OF \_\_\_\_\_\_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_,

by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Personally known \_\_\_\_\_\_\_OR Produced Identification \_\_\_\_\_\_\_.

Type of Identification Produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Notary Public

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Notary Public

Commission No. \_\_\_\_\_\_\_\_\_\_\_\_\_

Commission Expires: \_\_\_\_\_\_\_\_\_