



PLANNING AND BUILDING DEPARTMENT
AFFIDAVIT OF LEGAL INTEREST and
LETTER OF AUTHORIZATION

MH 2000 Dynasty Insurance Trust, "Owner" whose address is PO Box 4430
City Jackson State WY Zip 83001

As owner of property more specifically described as: Within Government Lot 1, Section 30, T4N, R46E

HEREBY AUTHORIZES Megan Nelms, Y2 Consultants as Agent to represent and act for the Owner in making application for and receiving and accepting on Owners behalf, any permits or other action by the Teton County Commissioners, Teton County Planning and Zoning, Building, and or other County Departments relating to the modification, development, planning, platting, re-platting, improvements, use or occupancy of land in Teton County, Idaho. Owner agrees that; Owner is or shall be deemed conclusively to be fully aware of and to have authorized and/or made any and all representations or promises contained in said application of any Owner information in support thereof, and shall be deemed to be aware of and to have authorized any subsequent revisions, corrections or modifications to such materials. Owner acknowledges and agrees that; Owner shall be bound and shall abide by the written terms or conditions of issuance of any such named representative, whether actually delivered to Owner or not. Owner agrees that no modification, development, platted or re-platting, improvement, occupancy, or use of any structure or land involved in the application shall take place until approved by the appropriate official of Teton County, Idaho, in accordance with applicable codes and regulations.

Owner agrees to pay any fines and be liable for any other penalties arising out of failure to comply with the terms of any permit or arising out of any violation of applicable laws, codes, or regulations applicable to the action sought to be permitted by the application authorized herein.

Under penalty of perjury, the undersigned swears that the forgoing is true and, if signing on the behalf of a corporation, partnership, limited liability company or other entity, the undersigned swears that this authorization is given with the appropriate approval of such entity, if required.

OWNER:

X [Signature] (Signature of Owner)

Christopher Hawks Trustee (Print Name)

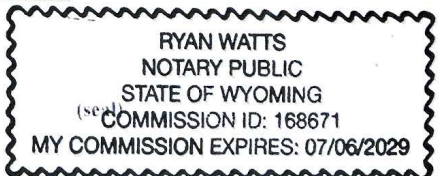
X (Signature of Co-Owner)

(Print Name) Title

X (Secretary or Corporate Owner) (Print Name)

NOTARY: STATE OF: Wyoming SS. COUNTY OF: Teton Zip: 83001

Subscribed and sworn to before me by Christopher Hawks this 24th day of August, 2023.



WITNESS my hand and official seal.

X Notary Public [Signature] Expiration Date