



## General Owner and Applicant Acknowledgement

### Signature Statement

The signature(s) hereby certify that the statements made by myself and constituting part of this application are true and correct. I am fully aware that any misrepresentation of any information on this application may be grounds for denial of this application. I agree that if this request is approved, it is issued on the representations made in this submittal, and any approval or subsequently issued building permit(s) or other type of permit(s) may be revoked without notice if there is a breach of representations or conditions of approval. The applicant/owner by his or her signature understands and agrees that he or she is responsible for the completion of all on-site and off-site improvements as shown and approved on the final plan (including landscaping, paving, lighting, etc.) prior to receiving a Certificate of Occupancy.

*Joseph A. Zock*

Signature of Property Owner

*2-25-26*

Date

*Lise Peterson*

Signature of Consultant

*3-3-26*

Date

*Lise Peterson*

Signature of Developer

*3-3-26*

Date

### Contact Information

Property Owner:	Click here to enter text. <i>VJOLLC</i>	Contact Name:	Click here to enter text. <i>Joseph Zock</i>
Email:	Click here to enter text. <i>jzock@Tucquesville.com</i>	Phone:	Click here to enter text. <i>(212) 903-0300</i>
Developer:	Click here to enter text. <i>Hammers Construction</i>	Contact Name:	Click here to enter text. <i>Lise Peterson</i>
Email:	Click here to enter text. <i>lpeterson@hammersconstruction.com</i>	Phone:	Click here to enter text. <i>719-570-1599</i>
Consultant	Click here to enter text. <i>Same as Developer</i>	Contact Name:	Click here to enter text.
Email:	Click here to enter text.	Phone:	Click here to enter text.

STATEMENT OF AUTHORITY

- 1. This Statement of Authority relates to an entity named: Veterans Villa Operating LLC
2. The type of entity is a:

- Corporation
Nonprofit Corporation
Limited Liability Company
General partnership
Limited partnership
Registered limited liability partnership
Business trust
Trust
Registered limited liability limited partnership
Limited partnership association
Unincorporated nonprofit association
Government or governmental subdivision or agency
Other

3. The entity is formed under the laws of (state): NE

4. The mailing address for the entity is: 50 Washington Street, Suite 402E, Norwalk CT 06854

5. The name and position of each person authorized to execute licenses, and/or instruments conveying, encumbering, or otherwise affecting title to real property on behalf of the entity is: Joseph A. Zock; Charles Lake; Kimberley Lake (BOARD MEMBERS)

6. (Optional) The authority of the foregoing person(s) to bind the entity is
not limited
limited as follows:

7. (Optional) Other matters concerning the manner in which the entity deals with interest in real property:

8. This Statement of Authority is executed on behalf of the entity pursuant to the provisions of Section 38-30-172, C.R.S.

Executed this 25 day of February, 2026

STATE OF Florida )
County of Indian River ) ss.

By:

The foregoing instrument was acknowledged before me this 25 day of February

2026 by Joe Zock as Board Member of VVO LLC

Witness my hand and official seal

My Commission Expires: 3/19/2027

[Handwritten signature]

Notary Public

