



AGENT AUTHORIZATION FORM

Property Description:

Address: _____

City: _____ Postal Code: _____

Please print:

Registered Property Owner: _____

Registered Property Owner: _____

Telephone: _____ Email: _____

The undersigned, registered property owners of the above noted property, do hereby authorize:

_____, of _____
(Contractor / Agent) (Name of firm)

Address: _____

Telephone: _____ Email: _____

to act on my behalf and take all actions necessary for the processing, issuance and acceptance of this permit and any and all standard and special conditions attached.

Property Owner's Address (if different than property above):

We hereby certify the above information submitted in this application is true and accurate to the best of our knowledge.

Authorized Signature

Authorized Signature

Date: _____

Date: _____

Witness Name

Witness Signature

Date: _____