



Authorized Agent Affidavit

A. PROPERTY INFORMATION

Address of Subject Property: _____
Parcel ID Number(s): _____
Acreage: _____

B. PERSON PROVIDING AGENT AUTHORIZATION

Name: _____ Title: _____
Company (if applicable): _____
Mailing Address: _____
City: _____ State: _____ ZIP: _____
Telephone: _____ FAX: _____ e-mail: _____

C. AUTHORIZED AGENT

Name: _____ Title: _____
Company (if applicable): _____
Mailing address: _____
City: _____ State: _____ ZIP: _____
Telephone: _____ FAX: _____ e-mail: _____

D. REQUESTED ACTION:

I hereby certify that I am the property owner of record, or I have received authorization from the property owner of record to file an application for a development permit related to the property identified above. I authorize the agent listed above to act on my behalf for purposes of this application.

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

State of _____ County of _____

The foregoing application is acknowledged before me this _____ day of _____, 20____, by _____

_____, who is/are personally known to me, or who has/have produced _____
as identification.

NOTARY SEAL

Signature of Notary Public, State of _____