LANDOWNER AUTHORIZATION FORM

Note: A signed Landowner Authorization Form is valid for up to six (6) months from the date of execution.

SUBJECT PROPERTY INFORMATION

Subdivision Name / Block / Lot: _____

Number of Lots: _____ Number of Acres: _____

Site APN(s): _____

General Location (cross streets): _____

County: _____ Previous Project Number(s): _____

PROJECT REPRESENTATIVE / APPLICANT

Company Name: _____

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____ Fax: _____

Email: _____

Project Representative's Signature: _____ Date: _____

OWNER AND AUTHORIZATION

Company Name: _____

Authorized Signatory: _____

Address: _____

City, State, ZIP: _____

Phone: _____ Other Phone: _____

Email: _____

☐ I will represent the application myself; ☐ I hereby designate _____ to act as my authorized agent for filing, processing, representation, and/or presentation of this development application.

I hereby certify that I am the owner of the subject property and that all information provided is true and correct. By signing below, I authorize the reviewing agency to make copies of any materials submitted in connection with this application as needed for review or in response to a lawful public information request.

Project Representative Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

NOTARY ACKNOWLEDGMENT

State of _____ County of _____ Subscribed and sworn before me this _____day of _____, 20_____.

Notary Public Signature: _____

(Notary Seal)