

AGENT AUTHORIZATION

Date: _____

Please be advised that I/we, _____
(PRINT NAME(S))

As the registered owner(s) of _____
(ADDRESS)

Appoint _____ as an agent authorized
(NAME OF PERSON TO ACT AS AGENT)

(ADDRESS/PHONE NUMBER OF AGENT)

- To obtain permit history on file for the above referenced address.
- To obtain copies of building plans on file for the above referenced address.
- To receive permits on behalf of the registered owner for the above referenced address.

Owner(s)

Signature: _____
