
AGENT AUTHORIZATION FORM

Date: _____

Project Address: _____

Project Parcel #: _____

I, (Owner Name) _____, as the owner of the above-referenced property, authorize (Agent Name): _____, to act on my behalf in obtaining permits and approvals.

This authorization includes:

- Township zoning and building approvals
- County or state permit approvals
- Other necessary permits or approvals as required

Property Owner Signature

Phone Number

Agent Signature

Phone Number