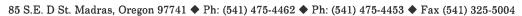
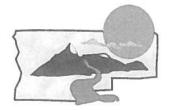
## JEFFERSON COUNTY

Community Development Department





## OFFICE OF THE COUNTY ENGINEER

Email:

## **AUTHORIZATION FORM**

Let it be known that			
(prin	t name clearly)		
Has been retained to act as my authorized agent to perfe	orm all acts for dev	elopment on my prope	rty noted below:
Project description:			<u> </u>
Site Address:			
Legal: TS, RE, Sec,Map, Tax Lot _	Account:		
These acts include:			
Pre application conferenceRim Setback inspect for inspections	ionsSite evalu	uationsPermit app	licationsRequests
The costs of the above actions, which are not satisfied b owner.	y the agent, are th	e responsibility of the u	ndersigned property
PROPERTY OWNER			
Signature:	Date:		
Print Name:			
Mailing address:	_ City:	, State:	, Zip:
Work Phone: ( ) Cell Phone: (	)		
Individual(s); Corporation; Limited Liability Cor	rporation; Trus	t	
Important Note: Indicate whether property is owned in inc Corporation, Limited Liability Company; or Trust). If prop signers. For example:			
If the owner is a Corporation, Limited Liability Corporatio form.	n or Trust, the follo	owing information is req	uired as part of this
If a Corporation – please provide the name of the	e President or othe	er authorized signor(s)	
If a Limited Liability Corporation – provide names	s of <u>all</u> members a	nd managers.	
If a Trust – provide the name of current Trustee(s)	s).		
In addition, you will need to include a copy of Bylaws (Co Company): or Certificate of Trust (Trusts) that verifies au			imited Liability
AGENT			
Signature:	Date: _		
Print Name:			
Mailing address:			
City: State:			
Home Phone: ( ) Cell Phone: (	)		