

ELBERTA



fur das gute Leben  
"for the good life"

MAYOR  
JIM HAMBY

# TOWN OF ELBERTA

COUNCIL:

ALMA DOEGE  
PAUL HOPPER  
MICHAEL HUDSON  
STEVE KIRKPATRICK  
VICKY NORRIS

CLERK/TREASURER  
LISA SALTER

## AGENT AUTHORIZATION FORM

I, We authorize and permit \_\_\_\_\_ to act as my/our representative and agent in any manner regarding this application which relates to property described as tax parcel ID # or PPIN# \_\_\_\_\_ with a physical address of: \_\_\_\_\_ . I/We understand that the agent representation may include but not limited to decisions relating to status, conditions, or withdrawal of this application. In understanding this, I/We release the Town of Elberta from any liability resulting from actions made on my/our behalf by the authorized agent or representative.

Note: All correspondence will be sent to the authorized representative. It will be the representative's responsibility to keep the owner(s) adequately informed as to the status of the application.

PROPERTY OWNERS(S): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name Printed: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
Name Printed: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
Address: \_\_\_\_\_ City / State: \_\_\_\_\_

\_\_\_\_\_  
Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

AUTHORIZED AGENT: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name Printed: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
Address: \_\_\_\_\_ City / State: \_\_\_\_\_

\_\_\_\_\_  
Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_