

ELBERTA



fur das gute Leben
"for the good life"

TOWN OF ELBERTA

Planning and Zoning
(251) 986-6174

Caryn Woerner
pandzinfo@townofelberta.com

AGENT AUTHORIZATION FORM

I, We authorize and permit _____ to act as my/our representative and agent in any manner regarding an 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: _____

Form Date: 03/2020