



AGENT AUTHORIZATION FORM

I, (PRINT PROPERTY OWNER'S NAME)

_____, AS THE PROPERTY OWNER OF THE PROPERTY DESCRIBED BELOW, HEREBY GIVE PERMISSION FOR (PRINT AGENT'S NAME)

_____ TO ACT AS MY AGENT FOR THE PURPOSE OF APPLYING FOR CAPACITY ENHANCEMENT / CONCURRENCY FOR THE AFOREMENTIONED PROPERTY.

Legal Description(s) or Parcel Identification Number(s) are required:

PARCEL ID NUMBER(S):

[Empty box for Parcel ID Number(s)]

LEGAL DESCRIPTION:

[Empty box for Legal Description]

Signature of the Property Owner

Date

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization, this _____ day of _____, 20____ by _____, as an individual/officer/agent, on behalf of himself/herself _____, a corporation/partnership. He/She is personally known to me or has produced _____ as identification and did/did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 20____.

AFFIX NOTARY STAMP

Notary Public Signature: _____
Print Name: _____
Commission No.: _____
Expires: _____