

Agent Authorization Form

I hereby give AUTHORIZATION to		umant
and to attend and represent me at all me indicated above. Furthermore, I hereby	ubmitted this application and all required material and docu eetings and public hearings pertaining to the application(s) give consent to the party designated above to agree to all of the approval of this application for the proposed use of) terms
Applicant Information		
Signature	Print Name	
Address	City State Zip	
Agent Information:		
Signature	Print Name	
Address	City State Zip	
Notary Public Information:		
The foregoing instrument was acknowle	dged before me this day	
of 20 by	Name of person acknowledging. He or she is pers	sonally
known to me, or who has produced	as identification (type of identification	ation
and did or did not take an oath (circle co	rrect response).	
Signature of Notary Public	Print Name	
Notary Public State of	County of	
Commission Number	Commission Expires	
Notary Seal or Stamp		