



City of Chewelah
AGENT AUTHORIZATION FORM

Property Legal Description:

Parcel ID: _____ Project No: _____

Address: _____

PLEASE PRINT

Property Owner: _____

Property Owner: _____

The undersigned, registered owner(s) of the above-noted property, do hereby authorize

_____, of _____
(Contractor/Agent) (Name of Consulting/Contracting Firm)

to act on my behalf and to take all actions necessary for the processing, issuance and acceptance of this permit/application, in addition to any and all standard or special conditions attached.

Property Owner's Address (If different from property above):

Telephone: _____ Email: _____

We hereby certify the above information submitted in this application is true and accurate to the best of our knowledge.

Authorized Signature

Date

Authorized Signature

Date