



BOARD OF ZONING APPEALS PROPERTY OWNER AUTHORIZATION

Case #: _____

PROPERTY OWNER INFORMATION

Name: _____

Mailing Address: _____

Subject Property Address: _____

Phone: _____ Email: _____

AUTHORIZATION

I/We hereby authorize the applicant named below to act as the applicant in the pursuit of a variance, special exception, or appeal from the Board of Zoning Appeals on the property identified as the subject property above.

Name of Applicant/Agent: _____

Applicant's Address: _____

Applicant's Phone: _____ Email: _____

ACKNOWLEDGEMENT (Please Initial The Following Box)

I/We as the property owner acknowledge and understand that if the request is denied from the Board of Zoning Appeals that for a period of **twelve (12) months** following the denial there shall not be accepted any new request involving the same property or any part thereof.

Signature of Property Owner(s): _____

Print Name of Owner(s): _____

Date: _____