



# Owner's Authorization for Applicant/Agent

FLAGLER COUNTY, FLORIDA  
1769 E. Moody Boulevard, Suite 105  
Bunnell, FL 32110

Telephone: (386) 313-4009 Fax: (386) 313-4109

Application/Project # \_\_\_\_\_

\_\_\_\_\_, is hereby authorized TO ACT ON BEHALF OF \_\_\_\_\_, the owner(s) of those lands described within the attached application, and as described in the attached deed or other such proof of ownership as may be required, in applying to Flagler County, Florida for an application for \_\_\_\_\_.

(ALL PERSONS, WHO'S NAMES APPEAR ON THE DEED MUST SIGN)

By: \_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner / Title (if owner is corporation or partnership)

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner

Address of Owner: \_\_\_\_\_ Telephone Number (incl. area code) \_\_\_\_\_

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_ and \_\_\_\_\_ who is/are personally known to me or who has produced \_\_\_\_\_ as identification, and who (did) / (did not) take an oath.

\_\_\_\_\_  
Signature of Notary Public (Notary Stamp)