



Office of Planning and Zoning

Agent Authorization Form

I/we, (print property owner name(s)) _____, as the property owner(s) of the real property described as follows, _____, do hereby authorize _____ (print agent's name) to act as my/our agent, to execute any petitions or other documents necessary (excluding impact fee deferral agreements) to affect the application approval requested and more specifically described as follows, _____, and to appear on my/our behalf before any administrative or legislative body in the County considering this application and to act in all respects as our agent in matters pertaining to the application. I/we hereby grant permission for staff to conduct a site visit in conjunction with this application.

Signature	Print Name of Property Owner	Date
-----------	------------------------------	------

Signature	Print Name of Property Owner	Date
-----------	------------------------------	------

State of Florida
County of Lake

The foregoing instrument was acknowledged before me this _____ day of _____, 20__, by _____, who is personally known to me or who has produced _____ as identification and who did _____ or did not _____ take an oath.

(Seal)

Notary Public (Signature)

My Commission Expires: _____

Legal Description(s), Alternate Key Number(s), or Physical Address is required:
Alternate Key or Physical Address:
Legal Description:

NOTE: All Applications shall be signed by the Owner(s) of the Property or some person duly authorized by the Owner to sign. The authority authorizing such person other than the Owner to sign must be attached.