



AUTHORIZED AGENT FORM – PUBLIC MEETINGS

I hereby authorize _____ to act as my authorized agent
for all public hearing(s) and legal relations with this application on property located at:

Site address _____

Section # _____ Township Name _____

Parcel Number(s) _____

Property Owner(s) name (print) _____

Property Owner(s) Signature(s) _____ Date _____

Authorized Agent(s) name (print) _____

Authorized Agent(s) Signature(s) _____ Date _____

Authorized Agent Phone Number _____

Authorized Agent Email _____