

**OWNER'S AUTHORIZATION FOR AGENT
PLANNING DEPARTMENT**

TOWN OF HILLIARD, FLORIDA

**EACH AND EVERY OWNER SHOWN ON THE PROOF OF
OWNERSHIP MUST SIGN AN AUTHORIZATION FORM**

Agent Authorization Form

I/We _____
(Print Name of Property Owner)

hereby authorize _____
(Print Name of Agent)

to represent me/us in processing an application for _____
(Type of Application)

on our behalf. In authorizing the agent to represent me/us, I/we, as owner(s) attest that the application is made in good faith and that any information contained in the application is accurate and complete.

(Signature of Owner)

(Signature of Owner)

(Print Name of Owner)

(Print Name of Owner)

State of Florida

} ss

Nassau County

Sworn to and subscribed before me on this _____ day of _____, 20____,
by _____

(Name of Person Making Statement)

**Signature of Notary Public
State of Florida**

**Print, type or stamp commissioned name
of Notary Public**

My Commission Expires: _____

Individual making statement is _____ personally known or _____ produced identification.

Type of identification produced: _____