



DEPARTMENT OF PLANNING AND BUILDING  
DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT  
1555 NORTH 17<sup>TH</sup> AVENUE  
GREELEY, CO 80631

## AUTHORIZATION FORM

I, (We), \_\_\_\_\_, give permission to \_\_\_\_\_  
(Owner – please print) (Authorized Agent – please print)

to apply for any Planning, Building or Septic permits on our behalf, for the property located at (address or parcel number) below:

\_\_\_\_\_

Legal Description: \_\_\_\_\_ of Section \_\_\_\_\_, Township \_\_\_\_\_ N, Range \_\_\_\_\_ W

Subdivision Name: \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Property Owners Information:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Authorized Agent Contact Information:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Correspondence to be sent to: Owner \_\_\_\_\_ Authorized Agent \_\_\_\_\_ Both \_\_\_\_\_ / by Mail \_\_\_\_\_ Email \_\_\_\_\_

Additional Info: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_