

OWNERS REPRESENTATIVES AFFIDAVIT FOR ZONING APPEALS

This is to certify that _____
is authorized to file an appeal with the Washington County Board of Appeals for

_____ ,
on property located _____.

The said appeal is authorized by _____
the property owner in fee.

PROPERTY OWNER:

Name

Address

Signature

Sworn and subscribed before me this _____ day of _____,

Notary Public

My Commission Expires: _____

AUTHORIZED REPRESENTATIVE:

Name

Address

Signature

Sworn and subscribed before me this _____ day of _____,

Notary Public

My Commission Expires: _____