AUTHORIZATION FORM
To REPRESENT PROPERTY OWNER(S)

DATE: _____

TO: Town of Townsend

I/we, the undersigned owner(s) grant full permission to:

APPLICANT(S) / AUTHORIZED REPRESENTATIVE(S):

_____	_____
Name (please print)	**Name (please print)**
_____	_____
Street Address	**Street Address**
_____ _____ _____	_____ _____ _____
City State Zip	**City State Zip**
_____/_____	_____/_____
Daytime Phone #(s) / Home Phone	**Daytime Phone #(s) / Home Phone**

to act as our agent and hereby authorize this representative to take any action, including but not limited to paying consulting fees, agreeing to conditions set by any applicable Board or Commission, signing agreements and/or extending deadlines. This agent has my/our full permission to submit applications, present plans, submit requirements and speak on my/our behalf with regard to:

PROPERTY LOCATED AT:

_____, Townsend, MA

Street Address

ASSESOR'S PARCEL ID: **Map #** _____ **Block #**_____ **Lot #**_____

OWNER (S):

_____	_____
Name (please print)	**Name (please print)**
_____	_____
Street Address	**Street Address**
_____ _____ _____	_____ _____ _____
City State Zip	**City State Zip**
_____/_____	_____/_____
Daytime Phone #(s) / Home Phone	**Daytime Phone #(s) / Home Phone**

_____	_____
Signature of Owner	**Signature of Owner**

07-19-10