COUNTY OF VENTURA

AUTHORIZATION OF AGENT

TO ACT ON PROPERTY OWNER'S BEHALF

I hereby authorize the person identified below to act as my agent to apply for, sign, and file the documents necessary to obtain the permits required for my project (excluding the *Notice to Property Owner*, the execution of which I understand is my personal responsibility). My agent should receive copies of all notices and communications related to my project unless I have otherwise notified the County.

Project Description:	
	clude Permit # if available)
	d other property identification as needed)
Name of Authorized Agent:	(Please Print)
Address of Authorized Agent:	
Phone Number of Authorized Agent: _	
E-Mail Address of Authorized Agent: PROPERTY OWNER ACKNOWLEDGEMENT	
Property Owner's Name:	(Please Print)
	(Please Print)
Property Owner's Signature:	Date:
Property Owner's E-Mail Address:	
Property Owner's Phone Number:	
acceptable to the agency must	ver's license, notarization, or other verification be submitted with this form to verify property ust be as shown on the latest Assessor records.
Verification of Property Owner Signature: □ D	Priver License
Staff Signature	Date