



Shaping a new tomorrow, today.

Authorization for Planning Applications

This authorization concerns the following parcel(s) of land

Property Owner Name: _____

- If a Business Entity, indicate type of company: _____
o Attach a copy of authority to sign on behalf of Company.
[] Authorized Signer's Resolution
[] Operating Agreement
[] Other (describe): _____

Assessor Parcel Number(s) _____

WHEREAS, the property owner is seeking to develop or improve real property in the Town of Gilbert, Arizona, which requires the filing, processing, and paying for certain zoning, construction, and inspection permits and reports.

WHEREAS, the owner elects to designate an agent with authority to file and process all necessary permits, applications, dedications, payments, assurances, decisions, commitments, and other information related to any and all reviews, zoning map amendments, general plan amendments, development variances, abandonments, plats, lot splits, lot ties, use permits, building permits, and other land use regulatory or related matter involving the land.

WHEREAS, the owner authorizes the Town of Gilbert to rely on the agent's authority as described in this document until three (3) work days after the date the owner delivers to the Town of Gilbert's Development Services or Planning Manager a written statement revoking this authorization.

WHEREAS, the owner agrees to immediately deliver to the Town of Gilbert's Development Services or Planning Manager written notice of any change in the ownership of the land or in the authority for the agent to act on the owner's behalf.

NOW THEREFORE, the undersigned owner(s) hereby designate(s) (please print name(s))

_____, as agent(s) to file and process the Planning applications and related documents with the Town of Gilbert, with such authority to continue until the application process is complete, or as may be revoked in writing.

_____, Signature

_____, Print Name

_____, Role/Title



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State of _____)

County of _____)

The foregoing authorization for processing Planning Applications was acknowledged before me

this _____ day of _____, _____, who is/are personally known
by me or have produced identification.

Notary Public

My Commission Expires: