



Community Development Department
Building Division

390 Towne Centre Drive– Lathrop, CA 95330
Phone (209) 941-7270 – Fax (209) 941-7268
www.ci.lathrop.ca.us

**AUTHORIZATION OF AGENT TO ACT ON PROPERTY
OWNER'S BEHALF**

Excluding the Notice to Property Owner, the execution of which I understand is my personal responsibility, I hereby authorize the following person(s) to act as my agent(s) to apply for, Sign, and file the documents necessary to obtain an Owner-Builder Permit for my project.

Scope of Construction Project (or Description of Work):

Please Print Information Requested.

Project Location or Address: _____

Name of Authorized Agent: _____

Address of Authorized Agent: _____

Phone Number of Authorized Agent: _____

I declare under penalty of perjury that I am the property owner for the address listed above and I Personally filled out the above information and certify its accuracy.

Property Owner (Print Name): _____

Property Owner's Signature: _____ Date: _____

Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's Signature.