AUTHORIZATION OF AGENT(S) BY EACH APPLICANT

(REQUIRED ONLY IF ANY AGENT WILL APPEAR FOR ANY APPLICANT):

RE: Property located at : _____
Town of Mamaroneck, New York
Application for _____

_____, being every Applicant, hereby authorize(s)_____(collectively, the "Agent"), with offices at_____, to appear on behalf of the Applicant before the Planning Board of the Town of Mamaroneck, New York in connection with this Application. Each Applicant acknowledges that conditions regarding the use of the Property may be imposed by the Planning Board if this Application is approved, and that such conditions may impact the Property. Each Applicant hereby authorizes each Agent to agree to such conditions, as the duly authorized agent of the Applicant, and to thereby bind the Applicant.

SIGNATURE OF EVERY APPLICANT – IF INDIVIDUAL(S):

_____ _____
Signature Signature

Print Name: _____ Print Name: _____

AUTHORIZED SIGNATURE OF EVERY APPLICANT – IF AN ENTITY/ENTITIES:

_____ _____
Print name of entity Print name of entity

By: _____ By: _____
Signature Signature

_____ _____
Print name Print name

Title: _____ Title: _____
Print Print