



**TOWN OF BALLSTON
ZONING BOARD OF APPEALS**

OFFICE USE ONLY

Date rec'd _____

Ref # _____

SBL _____

**OWNER AUTHORIZATION FOR
ZONING BOARD OF APPEALS REVIEW**

The undersigned, who is the owner of the premises known as _____ ,
and identified as Tax Map _____ ,
hereby authorizes _____ to bring the application herein
before the Zoning Board of Appeals of the Town of Ballston for an appeal. The undersigned further
permits the Town or its authorized representative access to the property to review existing site
conditions during the review process.

STATE OF NEW YORK)
COUNTY OF SARATOGA)SS.

On this _____ day of _____, Two Thousand and _____ ,
before me, the subscriber, personally appeared to me personally known and known to me to be the
same person described in and who executed the within Instrument, and he/she/they acknowledged to
me that he/she/they executed the same.

Owner

Notary Public