



City of Jonestown Development Services Department
AGENT AUTHORIZATION FORM

This form authorizes a person other than the property owner(s) to act on the owner's behalf for applications submitted to the Development Services Department.

PROPERTY INFORMATION

Application Type _____

Project Name (if applicable) _____

Property Address _____

Legal Description _____

TCAD Property ID(s) _____

PROPERTY OWNER(S)

Owner Name(s) _____

Mailing Address _____

Phone _____

Email _____

Additional Owner(s), if applicable _____

AUTHORIZED AGENT

Agent Name _____

Company (if applicable) _____

Mailing Address _____

Phone _____

Email _____

SCOPE OF AUTHORIZATION

- ☐ Prepare and submit application(s)
- ☐ Respond to Development Services comments
- ☐ Receive correspondence
- ☐ Attend meetings and hearings
- ☐ Receive final decision documents
- ☐ All of the above

AUTHORIZATION

I/We certify that I/we are the owner(s) of the property identified above or otherwise possess legal authority to authorize this request. I/We hereby designate the Authorized Agent identified above to act on my/our behalf in connection with applications submitted to the City of Jonestown Development Services Department for the property described herein. This authorization is limited to Development Services matters and does not authorize the transfer of ownership or conveyance of any interest in the property. This authorization remains in effect until final action has been taken on the associated application(s), unless revoked in writing by the property owner(s).

PROPERTY OWNER SIGNATURE(S)

Owner Signature

Date

TEXAS NOTARY ACKNOWLEDGMENT

STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned authority, on this day personally appeared _____, known to me (or proved to me through satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to this instrument and acknowledged that he/she/they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this ____ day of _____, 20 ____.

Notary Public, State of Texas

My Commission Expires: _____

STAFF USE ONLY

Date Received _____

Ownership Documentation Verified _____

Staff _____