CITY OF OLATHE

Individual, Couple, & Partnership Ownership and Agent Authorization Affidavit

I (we), _____, the undersigned, respectfully state:

1. That I am (we are) the record owner(s) of the following described real property (the "Property") located in the City of Olathe, Johnson County, Kansas: *(insert legal description below)*

   _____

   _____

2. That I (we) do hereby authorize _____ to act as Agent for the Application. *(If applicable)*
3. That I (we) agree to comply with all provisions of the Unified Development Ordinance as adopted by the City of Olathe and all other applicable regulations and laws.
4. That I (we) submit the following application(s) (the "Application") and agree to bind the Property in accordance with the Application and any terms or conditions of its approval by the City of Olathe.

   Application(s): _____

_____	_____	_____
Name (Owner #1)	*Name (Owner #2)*	*Name (Owner #3)*
_____	_____	_____
Address	*Address*	*Address*
_____	_____	_____
City, State Zip Code	*City, State Zip Code*	*City, State Zip Code*
_____	_____	_____
Phone Number	*Phone Number*	*Phone Number*

CERTIFICATION

STATE OF _____)
) SS.
COUNTY OF_____)

I (we), _____, hereby certify that I (we) signed the foregoing Ownership & Agent Authorization Affidavit as my (our) free act and deed and certify that I am (we are) the legal owner(s) of the Property in the foregoing Ownership & Agent Authorization Affidavit.

_____	_____	_____
(Signature, Owner #1)	*(Signature, Owner #2)*	*(Signature, Owner #3)*

Subscribed and sworn to before me this _____ day of _____, 20_____.

_____
Notary Public

_____
My Appointment Expires

Form updated 10/22/2025

CITY OF OLATHE

Corporate Ownership and Agent Authorization Affidavit

We the undersigned, respectfully state:

1. That _____ is the President of _____.
2. That _____ is the Secretary of _____.
3. That said _____ is the record owner of the following described real property (the "Property") located in the City of Olathe, Johnson County, Kansas: *(insert legal description below)*

   _____

   _____
4. That we do hereby authorize _____ to act as Agent for the Application. *(If applicable)*
5. That we agree to comply with all provisions of the Unified Development Ordinance as adopted by the City of Olathe and all other applicable regulations and laws.
6. That we submit the following application(s) (the "Application") and agree to bind the Property in accordance with the Application and any terms or conditions of its approval by the City of Olathe.

   Application(s): _____

_____

Name of Corporation *Phone Number*

_____

Address *City* *State* *Zip Code*

CERTIFICATION

STATE OF _____)
) SS.
COUNTY OF_____)

I, _____, President of _____, and

I, _____, Secretary of said corporation, hereby certify that we have been authorized to sign the foregoing Ownership & Agent Authorization Affidavit on behalf of said corporation and duly acknowledge the execution of the same to be the act and deed of the corporation.

_____ _____

(Signature of President) *(Signature of Secretary)*

Subscribed and sworn to before me this _____ day of _____, 20_____.

_____

Notary Public

_____

My Appointment Expires

Form updated 10/22/2025