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|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------------------------|
|  | <b>CITY OF DANA POINT</b><br><b>COMMUNITY DEVELOPMENT</b><br><b>BUILDING AND SAFETY</b><br>33282 Golden Lantern, Suite 209<br>Dana Point, CA 92629<br>949 248-3594<br><a href="http://www.danapoint.org">www.danapoint.org</a> |  | <b>A019 – Agent Authorization</b> |
|                                                                                  | <b>2025 CALIFORNIA CODES</b><br><small>CODE CYCLE</small>                                                                                                                                                                      |                                                                                    |                                   |
|                                                                                  | <b>01/01/2026</b><br><small>EFFECTIVE DATE</small>                                                                                                                                                                             |                                                                                    |                                   |
| <b>AUTHORIZATION OF AGENT</b>                                                    |                                                                                                                                                                                                                                |                                                                                    |                                   |

The undersigned is declaring that he/she is a legally authorized agent for the property owner or for a contractor who is under contract with the property owner.

### Agent for the **Owner**

|                                            |      |       |          |
|--------------------------------------------|------|-------|----------|
| Property Owner Name (Please Print or type) |      |       |          |
| Address:                                   | City | State | Zip Code |
| Authorized agent (Please Print)            |      |       |          |
| Address:                                   | City | State | Zip Code |
| Signature of Agent                         |      |       |          |
| Signature of Owner                         |      |       |          |

### Agent for the **Contractor**

|                                          |      |       |          |
|------------------------------------------|------|-------|----------|
| Contractor's Name (Please Print or type) |      |       |          |
| Address:                                 | City | State | Zip Code |
| Authorized agent (Please Print)          |      |       |          |
| Address:                                 | City | State | Zip Code |
| Signature of Agent                       |      |       |          |
| Signature of Contractor                  |      |       |          |