Permit No.

## COUNTY

## LDS-03 AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNERS BEHALF LAND DEVELOPMENT SERVICES

800 South Victoria Avenue, Ventura, CA 93009 (805) 654-3027 | PWA\_LDServices@ventura.org



I hereby authorize the person identified below to act as my agent to apply for, sign, and file the documents necessary to obtain the permits required for my project (excluding the *Notice to Property Owner*, the execution of which I understand is my personal responsibility). My agent should receive copies of all notices and communications related to my project unless I have otherwise notified the County.

Project Description:		<del> </del>	<del></del>
APN(s):			
Project Address:			<del></del> -
Name of Authorized Agent:		<del> </del>	
Address of Authorized Agent:			
Phone Number of Authorized Agent:			
E-Mail Address of Authorized Agent:			
PROPERTY OWNER A	ACKNOWLE	DGEMENT	
I declare under penalty of perjury that I am the proper filled out the above information and certify its accura all ordinances of the County of Ventura and that any in accordance with the requirements of the County o	cy. Further, I a approvals grai	gree that I and my ag	gent will abide by
Property Owner's Name:			
Property Owner's Signature:	Date:		
Property Owner's Mailing Address:			
Property Owner's E-Mail Address:			
Property Owner's Phone Number:			
Note: A copy of the owner's driver's license, notarization, submitted with this form to verify property owner's signaturecords.			-
Staff Verification of Property Owner Signature: Driv	er License	Notarized Letter	Other
Staff Signature		Date	