# CITY OF CITRUS HEIGHTS

**BUILDING & SAFETY DIVISION**
6360 Fountain Square Drive, Citrus Heights, CA 95621 (916) 727-4760
Building@CitrusHeights.Net

## AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNER'S BEHALF FOR BUILDING PERMIT RELATED ACTIVITY

I hereby authorize the following person(s) to act as my agent(s) to apply for, sign, and file the documents necessary to obtain an Agent-for-Owner/Builder permit for my project.

_____
Scope of Construction Project (or Description of Work):

_____
Project Location or Address

Name of Authorized Agent: _____

Telephone Number _____

Email: _____

_____
Address of Authorized Agent

_____
Signature of Authorized Agent

I declare under penalty of perjury that I am the property owner for the address listed above, and I personally filled out the above information and certify its accuracy.

***Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.***

_____
Print Property Owner's Name

_____ _____
Property Owners Signature Date

**OFFICE USE**

Signature Verification: ☐ Driver's License ☐ Other - Type: _____

Staff Approval: _____