

## City of Newton, Massachusetts

Department of Planning and Development 1000 Commonwealth Avenue Newton, Massachusetts 02459 Telephone (617) 796-1120 Telefax (617) 796-1142 TDD/TTY (617) 796-1089 www.newtonma.gov

Barney Heath Director

## **Property Owner Authorization**

Date:					
Property Location:					
	Number	Street Address			
Property Owner:					
	Name	Contact Number			
<b>Current Mailing Address</b>	:				
	Number	Street Name			
 City/Town	State	Zip Code			
<ol> <li>This application for property is made</li> <li>I(we) grant permin property for the property</li></ol>	or a land use permit or adr with my permission. ssion for officials and emp ourposes of this application	to this application and I (we) consent as follow ministrative approval for development on my bloyees of the City of Newton to access my n.  So to the subject property during regular busine	(our)		
hours and will attempt to		ent prior to any visit. Further, members of a	200		
The undersigned "Property Owner" assumes full responsibility for compliance with applicable codes, ordinances, regulations, and the City of Newton codes, procedures, and requirements.					
I (we) give our permission	n for the applicant to subm	nit this application as my agent (see Page 2).			
establishment or propert	•	t and may be any individual representing the ent must also be legally authorized to make ling the application.			
Property Owner/Owner	Representative Signature	:			

## ONLY FILL OUT IF YOU ARE NOT THE PROPERTY OWNER OF RECORD

## **Applicant/Agent Information**

applicant/Agent: N	ame		
pplicant/Agent Address:			
lumber		Street Name	
ty/Town	 State	 Zip Code	