

WAUKESHA COUNTY DEPARTMENT OF PARKS AND LAND USE
PLANNING AND ZONING DIVISION
515 W. MORELAND BLVD, ROOM AC 230 WAUKESHA, WI 53188
(262) 548-7790 Fax (262) 896-8071

Email pod@waukeshacounty.gov Website www.waukeshacounty.gov/planningandzoning

LANDOWNER'S AUTHORIZED AGENT FORM

Subject Property Address _____

Street/Section/Town (FP Dev in ROW Permits only) _____

Add Location Description (FP Dev in ROW Permits only) _____

Tax Key No(s), if applicable _____

Owner(s) of the Subject Property* _____

Officer to be Contacted (if Corporate Owner) _____

Owner's Mailing Address _____

Phone (Day) _____ Phone (Evening) _____

*The applicant for any permit, variance, special exception, appeal, conditional use, site plan, plan of operation, rezoning, comprehensive development plan amendment, CSM, subdivision plat, license or other application for governmental approval under the Planning and Zoning Division ordinances **shall be the landowner**, specifically a person or entity holding fee title to the subject property, as set forth below.

- A. In the case of a corporation, an officer or by a member of the corporation who has overall responsibility for the operation of the site for which the permit is sought.
- B. In the case of a limited liability company, a member or manager.
- C. In the case of a partnership, a general partner.
- D. In the case of a sole proprietorship, the proprietor.
- E. For a unit of government, by an elected official or other duly authorized representative.
- F. In the case of an individual, by the individual, an attorney, or one allowed to act as power of attorney.

I, _____ (owner's name), authorize the named agent below to represent my interests (see ** below) in the subject property described above for the purpose of these applications and any permits subsequently issued.

Owner's Signature(s) _____ Date _____

Owner's Signature(s) _____ Date _____

Agent _____

Agent's Company Name (if applicable) _____

Agent's Mailing Address _____

Phone (Day) _____ Phone (Evening) _____

**I, the authorized agent for the owner, am aware of the requirements of the Planning and Zoning Division ordinances and I understand and agree to follow the procedures, deadlines, fees, inspection requirements, and the proposal associated with these applications and any permits subsequently issued.

Agent's Signature _____ Date _____