	CONSENT FORM
or contract purchaser does not intend to attend all meeting	owner(s) and contract purchaser, if applicable, to an agent, if the property owner(s) gs and submit in person all material pertaining to the application. Consent to a firm vise specified. Consent is valid for one year from date of notary, unless otherwise subject property.
Project Name:	
Submittal Date:	
This form shall serve as CONSENT for the agent identifie application(s) affecting property I have an ownership inte	ed below to prepare or have prepared and submit all documents for the following crest in:
$[\sqrt{\ }]$ Plat Waiver and Required Improvements Installa	ation Waiver
	(type, stamp or print clearly full bmitted this application and all required material and documents. Furthermore, I gree to all terms and conditions which may arise as part of the approva I of this
statements or information made in any paper or plans sub application, related material and all attachments become on not be returned. I understand that any false, inaccurate revocation or administrative withdrawal of this application required to process this application. I further consent to	ve an ownership interest in is the subject of this application. I further certify the omitted herewith are true and correct to the best of my knowledge. I understand this official records of the Engineering Department of Palm Beach County, Florida, and will e or incomplete information provided by me or my agent will result in the denial, n, request, approval or permits. I acknowledge that additional information may be o Palm Beach County to publish, copy or reproduce any copyrighted documents. I further agree to all terms and conditions, which may be imposed as part of the
OWNER/TRUSTEE INFORMATION: I am the [] owner	[] trustee (✓one)
(Name - type, stamp or print clearly)	(Signature)
(Address)	(City, State, Zip)
AGENT INFORMATION:	
(Name - type, stamp or print clearly)	(Name of firm)

NOTARY PUBLIC INFORMATION:

My Commission Expires on:

(Address)

STATE OF FLORIDA COUNTY OF PALM BEACH

(City, State, Zip)

_______, 20_____, by _________ who is \square personally know to me or who has produced _______ (type of identification) as identification.

(Name - type, stamp or print clearly)

(Signature)

The foregoing instrument was acknowledged before me by means of \Box physical presence or \Box online notarization, this _____ day of

NOTARY'S SEAL OR STAMP