

Town of Johnsburg
Planning & Zoning Department
219 Main Street
North Creek, NY 12853

AUTHORIZATION FORM

“TO ACT AS AGENT FOR”

I, _____ owner of the premises located

at: _____ Town of _____,

Tax Parcel # _____,

hereby designate: _____,

as my AGENT regarding my Permit Application

for: _____

Date

Signature