



COMMUNITY
DEVELOPMENT

RECORD OWNER(S)

Case No: _____

Name (Please print)

Name (Please print)

Address

Address

City Zip Code Phone

City Zip Code Phone

Name (Please print)

Name (Please print)

Address

Address

City Zip Code Phone

City Zip Code Phone

PROPERTY AUTHORIZATION

The Undersigned States That They Are The Owner of the property described herein and hereby gives authorization for the filing of this application. Further, I do by my/our signature(s) on this agreement, absolve the City of Lancaster of all liabilities regarding any deed restrictions that may be applicable to the property described herein.

Print Name Signature Date

Print Name Signature Date

Print Name Signature Date

Print Name Signature Date

CERTIFICATION

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief.

Print Name (Applicant or Applicant's Agent) Signature Date