



**CITY OF SANIBEL, FLORIDA  
BUILDING & PLANNING DEPARTMENT  
OWNER'S AUTHORIZATION AND CERTIFICATION**

TO: CITY OF SANIBEL DATE: \_\_\_\_\_

OWNER: \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(E-mail Address) \_\_\_\_\_  
(Phone No.)

RE: \_\_\_\_\_  
(Subject Property Street Address)

\_\_\_\_\_  
(Subject Property Tax Parcel Number)

In conjunction with my application for \_\_\_\_\_ to be filed with the City of Sanibel, I hereby designate the following person as my representative and authorize this person to apply for permits on my behalf, and to act in my behalf with regard to all applications as if I were present and acting on my own. This authorization shall remain in force until I deliver a written revocation to the City of Sanibel.

\_\_\_\_\_  
(Print Name of Designated Representative)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State, Zip)

I hereby certify that I am an owner of property referenced above, that I have authority to file and prosecute an application for construction/development and that I have the authority to make the above designation of a representative.

\_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_  
(Print Name of Owner)

\_\_\_\_\_  
(Designated Representative Signature)

\_\_\_\_\_  
(Designated Representative Title)

\_\_\_\_\_  
(Designated Representative Phone Number)

\_\_\_\_\_  
(Designated Representative E-mail)

Note: If the property is held by a corporation or other business entity, provide a copy of the business registration indicating the name and address of the entity's authorized agent for service of process.