Town of Sharpsburg Board of Zoning Appeals

Owner's Representative Affidavit

This is to certify that _____ (name of **Authorized Representative**) is authorized to file an appeal with the Town of Sharpsburg Board of Appeals for an appeal for _____ with respect to the property located at _____, Sharpsburg, Maryland. The said appeal is authorized by _____ and _____(Name(s) of **Owner(s)**) who is/are the property owner(s) in fee. (If more than one owner, all must sign.)

PROPERTY OWNER	**PROPERTY OWNER**
_____	_____
Name	Name
_____	_____
Address	Address
_____	_____
City, State, Zip Code	City, State, Zip Code
_____	_____
Phone Number	Phone Number
_____	_____
Owner's Signature	Owner's Signature

On this _____ day of _____, 20_____, before me, the undersigned notary, personally appeared _____, and _____, known to me or satisfactorily proven to be the person(s) whose name(s) are subscribed in the foregoing instrument as Owners of the subject property, and acknowledged that he/she/they executed the same in the capacity therein stated for the purposes therein contained.

_____

Notary Public

My Commission Expires:

_____

_____

Typed/Printed Name of Notary

AUTHORIZED REPRESENTATIVE

_____

Name

_____

Address

_____

City, State, Zip Code

_____

Phone Number

_____

Authorized Representative's Signature

Revised January 12, 2015