



TOWN OF BURGAW ZONING COMPLIANCE PERMIT PROPERTY OWNER STATEMENT

Applicant Name: _____

Location: _____

Owner: _____

PIN: _____

Requested Use(s): _____

Owner's Statements & Signatures

[Required if applicant is not property owner]: In filing this application for a zoning permit, I/we, as the property owner(s), hereby certify that all of the information presented in this application is accurate to the best of my knowledge and belief. I hereby authorize the applicant to submit an application affecting the use of my property. I/We understand that the issuance of this permit will override any previous permits and grandfathered uses, including Conditional Use Permits that may have been issued for my property.

Signature of Owner(s): _____ Date: _____

[Required if owner wishes to establish an agent (attorney, real estate agent, etc.):] I/we hereby designate _____ to act on my behalf regarding this application, to receive and respond to administrative comments, to resubmit plans on my behalf, and to speak for me in any public meeting regarding this application.

Signature of Owner(s): _____ Date: _____