

# COUNTY OF MONTEREY

## HOUSING AND COMMUNITY DEVELOPMENT



Planning - Building - Housing  
1441 Schilling Place, South 2<sup>nd</sup> Floor  
Salinas, California 93901-4527  
(831) 755-5025

### Agent Declaration Form

Owner's Name: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
Owner's Phone: \_\_\_\_\_  
Permit Number: \_\_\_\_\_  
A.P.N: \_\_\_\_\_  
Permit Address: \_\_\_\_\_

### Owner's Agent

Until revoked in writing, the undersigned hereby designates the person(s) listed below to act as my agent to obtain any permits. The person (s) listed as my agent has my permission to sign all necessary declarations in order to obtain permits and/or to discuss the code enforcement case. Further I certify that all the declarations that my agent signs are correct and I agree to follow all requirements on the permit as if I had read all of the declarations and signed the permits myself personally:

Agent: \_\_\_\_\_ Date: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_

\_\_\_\_\_  
Signed owner (s)

\_\_\_\_\_  
Date