

Town of Foster Planning Department Owner Authorization

APPLICANTS FOR SUBDIVISION: Fill out only section (1) below if property owner is same as applicant. Fill out sections (1) *and* (2) below if applicant is other than property owner. Please type or print requested information.

(1) I,		, hereby	certify that I am the owner of property
designated as Assessor's Plat		-	
as shown on the Town of Foster's Ta	x Assessor's Maps.		
(2) I hereby authorize the application	for subdivision by _	(nam	to the of person representing owner)
be submitted to the Administrative O	fficer of the Town o	f Foster for rev	view and decision by the Planning
Board.			
WITNESS its name this	-		ignature of Owner of Property)
STATE		COUNTY OF	
in		_ on the	day of
personally appeared			to me known and known
by me to the party executing the fores	going instrument and	d acknowledge	ed said instrument, by him/her
executed, to be his free act and deed,	as		
(Individual, Corporation, Trustee, I	Partnership, Non-profit,	etc.)	
		Notary Publi	c

My Commission Expires: _____