

VILLAGE OF SAGAPONACK

PO Box 600 3175 Montauk Highway Sagaponack, NY 11962 www.sagaponackvillage.org 631-537-0017 631-537-0612 (FAX)

AUTHORIZATION AND CONSENT

STATE OF NEW	YORK)
COUNTY OF) ss:

_____ being duly sworn depose

and say:

1. The undersigned are the sole owners of premises at (address of premises):

2. The undersigned consent to entry and inspection of the above premises as needed by the

Building Inspector/AHRB/ZBA/Planning Board.

3. The undersigned authorizes ______ whose contact

information is ______ to appear on our behalf before the

officials and agencies of the Village of Sagaponack.

Sworn to before this _____ day of ______, 20____

Print Name

Notary Public

Sworn to before this _____ day of ______, 20____

Notary Public

Signature

Print Name

Signature