

## **AGENT/CONSULTANT AUTHORIZATION FORM**

## **Growth Management Department Environmental Division**

## **INSTRUCTIONS**

1. The following form shall be completed by the authorized agent/consultant and the property owner.

2. In order to process the associated application, a copy of this executed document shall be provided to the Growth Management Department, Environmental Division or uploaded to the Martin County Digital Land Management Citizen Access website: <a href="https://aca-prod.accela.com/MARTINCO">https://aca-prod.accela.com/MARTINCO</a>		
TO BE COMPLETED BY AUTHORIZED AGENT/CONSULTA	NT.	
By signing this application form, I certify that (choose one) $\Box$ I a applied for by the property owner(s), according to the supporting d am familiar with the information contained in this application and re is an application and not a permit, and that commencement of clear Code. I understand that this application, and any approval for develobligation for obtaining any other required federal, state, water nactivities.	m applying on behalf of the property ow lata and other incidental information file epresent that such information is true, co aring or construction activities prior to a lopment issued pursuant thereto, does r	ed and uploaded with this application. I omplete and accurate. I understand this approval is a violation of Martin County not relieve the property owner(s) of any
I further certify that I have read the instructions and fully und failure to comply or omission thereof may result in no action being t		
Typed/Printed Name of Agent/Consultant	Signature of Agent/Consultant	t (Date)
TO BE COMPLETED BY PROPERTY OWNER:		
this application for approval to conduct any development autho information in support of this application. In addition, I authorize the that may be necessary to procure such approval.  I hereby recognize that any member of the Board of County Co but not limited to, staff of the Growth Management or the Publi development approval or permit has been issued, or where there is for the purpose of ascertaining the state of compliance with County related to the enforcement of the building code. No person shall re one of the specified agencies who requests entry for the purpose of hamper or interfere with any such inspection. If requested, the own results of the compliance determination.	e above-listed agent to bind me, or my co ommissioners (BCC) and any duly author ic Works Department, may enter and it a reasonable cause to believe that a de Codes. The interiors of buildings shall no fuse immediate entry or access to any a inspection and who presents appropriate	rporation, to perform any requirements ized representative of the BCC, such as, inspect any parcel of land for which a evelopment activity is being carried out, ot be subject to such inspections unless authorized representative of the BCC or the credentials. No person shall obstruct,
Typed/Printed Name of Property Owner	Signature of Property Owner	(Date)
NOTARY	Y ACKNOWLEDGMENT	
STATE OF COUNTY OF		
This instrument was acknowledged before me on day of	, 20, by	<del>·</del>
He or she ( ) is personally known to me or ( ) has produced	as ide	entification.
(Notary Seal)		
	Notary Pu	ublic signature

My commission expires: \_\_