

Environmental Health

500 N. Main Street
Suite #47
Monroe, NC 28112

T. 704.283.3553
unioncountyeh@unioncountync.gov
www.unioncountync.gov

Authorization to Act as Agent for Owner

Any application /document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agent for the owner. This form also allows the specified individuals to sign or receive any application/document/permit on behalf of the owner and allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any and all permit conditions stated on permits issued by this Division are followed.

I, _____, am the legal owner of the property located at _____ (address, subdivision and lot #). The tax parcel identification number(s) is _____, located in Union County, North Carolina.

I do hereby authorize _____ (print agent and company name, if applicable), to act as an agent on my behalf in applying for/signing/obtaining any of the documents associated with Union County Environmental Health services.

Signature of Owner

Date

Signature of Authorized Agent

Date

