



**AUTHORITY TO ACT AS AGENT
REZONING, VARIANCE, RESURVEY OR SUBDIVISION REQUEST**

This is to certify that I am (we are) the property owner(s) of the property located at:

Parcel ID#(s) _____

PLEASE CHECK ONE:

___ I (we) here by request that the property be
Rezoned from _____ zoning classification to _____ zoning classification.

___ I (we) request a variance from the Zoning Ordinance of the City of Irondale.

___ I (we) are submitting a subdivision request or resurvey request.

_____ is hereby authorized to act as my (our) agent in this endeavor.

Signed this ___ day of _____, 20 ___.

Property Owner

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20____.

Notary Public