

Town of North Hampton Zoning Board of Adjustment Application Authorization

I/We	
(Property Owner*)	
hereby authorize	
(Applicant Name and Address)	
to appear before the Zoning Board of Adjustment on my/our behalf with a	
	Application
(type of application)	
for	
(project name and description)	
Property location/address:	
Tax map and lot number:	
Zoning District:	
Property Owner* Signature	Date
Notary Public Signature	Date

^{*}All listed owners of a property must sign an application authorization form.