

PEND OREILLE COUNTY
COMMUNITY DEVELOPMENT DEPARTMENT
418 S. Scott Avenue
P.O. Box 5066
Newport, WA 99156
(509) 447-4821
pendoreilleco.org



LANDOWNER/AGENT CONSENT FORM

I (we), the undersigned owner(s) of record of (*geographic ID or property ID*) _____
located at (*physical address*) _____, consent to and authorize
(*agent name*) _____ to act on my behalf for the purposes
of obtaining approval for (*development type*) _____
submitted to Pend Oreille County.

I (we), as the landowner(s) of the above described property understand and agree to the following:

- I (we) am/are the legal owner(s) of the subject property and may act on behalf of any and all interested parties, financial and otherwise.
- I (we) am/are responsible for all activities occurring on the subject property to which an application is made.
- That Pend Oreille County, its officers, and staff shall not be held liable for any activities arising from the actions of the above named agent.

Owner Contact Information

Property Owner(s): _____ Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
E-mail: _____

Applicant Information

Authorized Agent: _____ Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
E-mail: _____

APPLICANT SIGNATURE(S)

I certify that the information contained on this application is true, complete, and accurate to the best of my knowledge. I understand that the information will be used by Pend Oreille County for determining whether this proposal meets all development requirements.

PROPERTY OWNER

DATE: _____

AGENT/PRIMARY CONTACT

DATE: _____