city of KIRKSVILLE

Codes and Planning
201 S. Franklin St.
Kirksville, MO 63501
Phone: 660.627.1272
Fax: 660.627.1026
kirksville.gov

AGENT AUTHORIZATION FORM

This letter shall serve as authorization for _____ to act as an agent on
(Agent's Name)
my / our behalf for the application submitted with this document regarding the property located at

_____.

I / we further understand and agree that I / we / they should still be responsible for all application conditions and provisions.

_____	_____	_____
Agent's Printed Name	Agent's Signature	Date
_____	_____	_____
Owner's Printed Name	Owner's Signature	Date
_____	_____	_____
Owner's Printed Name	Owner's Signature	Date
_____	_____	_____
Owner's Printed Name	Owner's Signature	Date
_____	_____	_____
Owner's Printed Name	Owner's Signature	Date

STATE OF MISSOURI)
) SS.
COUNTY OF ADAIR)

On this _____ day of _____, 20__, before me personally appeared _____ to me known to be the person described in and who executed the foregoing instrument, and acknowledged that (s)he executed the same as his/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Kirksville the day and year last above written.

My commission expires:_____ _____
{SEAL} Notary Public

STATE OF MISSOURI)
) SS.
COUNTY OF ADAIR)

On this _____ day of _____, 20__, before me personally appeared _____ to me known to be the person described in and who executed the foregoing instrument, and acknowledged that (s)he executed the same as his/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Kirksville the day and year last above written.

My commission expires:_____ _____
{SEAL} Notary Public

STATE OF MISSOURI)
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COUNTY OF ADAIR)

On this _____ day of _____, 20__, before me personally appeared _____ to me known to be the person described in and who executed the foregoing instrument, and acknowledged that (s)he executed the same as his/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Kirksville the day and year last above written.

My commission expires:_____ _____
{SEAL} Notary Public

STATE OF MISSOURI)
) SS.
COUNTY OF ADAIR)

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STATE OF MISSOURI)
) SS.
COUNTY OF ADAIR)

On this _____ day of _____, 20__, before me personally appeared _____, husband and wife, known to me as the person (s) described in and who executed the foregoing instrument, and acknowledged that they executed the same as their free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Kirksville the day and year last above written.

My commission expires:_____ _____
{SEAL} Notary Public