

Flood Control District of Maricopa County

FLOODPLAIN USE PERMIT/CLEARANCE APPLICATION PROPERTY OWNER AUTHORIZATION FORM

FORM MUST BE COMPLETED IF THE APPLICANT IS NOT THE PROPERTY OWNER

I hereby authorize:	Name:	
	Address:	
	City, State, Zip:	
	E-mail address:	
application and supp and to take all act	orting materials, for tion required related	use permit/clearance for development, as described in the my property at, to the requested development on my property including information required by the Flood Control District of Maricopa
Property Owner Signature:		
Property Owner Printed Name:		
Property Owner Add	ress:	
City, State, Zip		
Property Owner Phone:		
Property Owner e-mail:		
Date:		
NOTE: This form is for materials.	all Floodplain Use Peri	mits/Clearance except for extraction of sand and gravel or other
DISTRICT USE ONLY Tracking Number:		Project Name: