

**CHESTER TOWNSHIP**  
Letter of Authorization and Representation

Applicants Name (Individual/\*Company): \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ E-mail Address \_\_\_\_\_

I/We \_\_\_\_\_, \*\* owner(s) of the property located  
at: \_\_\_\_\_

hereby authorize \_\_\_\_\_ (as listed above) to act as my/our designated agent and representative in the following zoning matter(s) before Chester Township and acknowledge that any variance decision may permanently effect property rights and is legally binding:

\_\_\_ Application for Zoning Certificate \_\_\_ Variance Application \_\_\_ Conditional Use Application

Explanation of Request(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Property Owner(s) Signature(s)      Printed Name(s)      Date

\_\_\_\_\_  
Property Owner(s) Signature(s)      Printed Name(s)      Date

Property Owner's Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ E-mail Address: \_\_\_\_\_

\* Attach corporate resolution, if applicable.

\*\* Attach a copy of the property deed or other documentation verifying property ownership.

Sworn to and subscribed in my presence, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**Notary Public**