

# OWNER ACKNOWLEDGEMENT FORM

## Purpose

To provide authentication or representation which is needed for every submittal to the Town of Prosper. Failure to provide correct authorization or representation may result in rejection of application.

**Please utilize this form with all type of applications.**

**Check one of the three following boxes:**

☐

**I will represent the application myself**

Property Owner Information: (Printed or Typed) \_\_\_\_\_

Name of Person Authorized to Sign Application as Owner: \_\_\_\_\_

Name of Company: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

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**Informational only (For a pre-application meeting request, check this box)**

### Requester's Information

Name of Person Authorized to be Project Representative: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

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**I hereby designate \_\_\_\_\_ (printed name of project representative) to act in the capacity as my agent for submittal, processing, representation, and/or presentation of this application. The designated representative shall be the principle contact person for responding to all requests for information.**

Property Owner Information: (Printed or Typed) \_\_\_\_\_

Name of Person Authorized to Sign Application as Owner: \_\_\_\_\_

Name of Company: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### Project Representative Information

Name of Person Authorized to be Project Representative: \_\_\_\_\_

Name of Company: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

THE STATE OF TEXAS

COUNTY OF \_\_\_\_\_

BEFORE ME, a Notary Public, on this day personally appeared (printed owner's name) the undersigned, who, under oath, stated the following: "I hereby certify that I am the owner, for the purposes of this application; that all information submitted herein is true and correct."

\_\_\_\_\_  
Owner(s) Signatures

SUBSCRIBED AND SWORN TO before me, this day of \_\_\_\_\_ 20\_\_ .

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Notary Seal