



Public Works Agency
— Alameda County —

BUILDING INSPECTION DEPARTMENT

(510) 670-5440 • FAX (510) 293-0960

www.acpwa.org

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AUTHORIZATION OF AGENT TO ACT
ON PROPERTY OWNER'S BEHALF

[Health and Safety Code 19825]

Excluding the Notice to Property Owner, the execution of which I understand is my personal responsibility, I hereby authorize the following person(s) to act as my agent(s) to apply for, sign, and file the documents necessary to obtain an Owner-Builder Permit for my project.

Description of Work: _____

Project Location or Address: _____

Name of Authorized Agent: _____

Address of Authorized Agent: _____

Phone Number of Authorized Agent: _____

I declare under penalty of perjury that I am the property owner for the address listed above and I personally filled out the above information and certify its accuracy.

Property Owner's Signature: _____ **Date:** _____

Print Name: _____

Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

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