



Doraville Office Use Only	
Permit #	
Parcel ID	

PROPERTY OWNER AUTHORIZATION AFFIDAVIT

The undersigned hereby understands that an application is being made to perform construction on their own real property.

Property owners are to complete this affidavit and have it returned to the City of Doraville.

Affidavits may be returned in person, online, or via email to permits@doravillega.us.

I, _____ **PRINT NAME HERE** _____, swear that I am the owner of the property listed below.

Property Address:	
Permit Type:	

This property, as shown in the official records of DeKalb County, Georgia, is the subject matter of the attached application. I authorize the person named below to act as the applicant in the pursuit of this application. I also hereby authorize City staff to inspect the premises of the above-described property.

Authorized Applicant Information

Name:	
Address:	
Phone:	
Email:	

1. I further acknowledge the following:

The Official Code of Georgia Annotated § 16-10-71 provides, in pertinent part, that:

- a. A person ... who executes a document knowing that it purports to be an acknowledgment of a lawful oath or affirmation commits the offense of false swearing when, in any matter or thing other than a judicial proceeding, he knowingly and willfully makes a false statement.
- b. A person convicted of the offense of false swearing shall be punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both.

2. Under penalties of perjury, I declare the following:

- a. I have read the foregoing affidavit; and
- b. The facts stated in it are true.

Signature of Property Owner

Date

Printed Name of Property Owner