



Doraville Office Use Only	
Permit #	
Contractor #	
Parcel ID #	

Property Owner Authorization Affidavit

INSTRUCTIONS: Owners are to complete the affidavit in front of a Notary and return to Doraville.

TYPE OF APPLICATION: _____

I, _____, swear that I am the property owner of _____
 (Print Owner’s Name) (Print Address)

and parcel identification number _____ as shown in the records of DeKalb County, Georgia and Gwinnett County, Georgia which 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	
Mailing Address	
Phone	
Email	

Signature of Property Owner

Personally Appeared Before Me

Print Name of Property Owner

Who swears that the information contained in in this authorization is correct and true to the best of his or her Knowledge and Belief.

Signature of Notary Public

Date