



CITY OF ROGUE RIVER

133 Broadway • Box 1137 Rogue River, Oregon 97537 • (541) 582-4401

Fax: (541) 582-0937 • website: cityofrogue river.org

LETTER OF AUTHORIZATION

OWNERS SIGNATURE MUST BE NOTARIZED

DATE: _____

Let it be known that _____ (Agent) is a duly authorized representative to act as my agent to perform all acts in conjunction with filling applications and/or other required documents relative to: _____

on my property located at: _____

Address or road: _____

Township 36 South, Range 4 West, Section _____, Tax Lot _____.

Owner's Signature *(must be notarized)*

Agent's Name

Owner's Address

Agent's Address

Owner's Phone Number

Agent's Phone Number

STATE OF OREGON COUNTY OF JACKSON

Signed or attested before me on _____ (date) by _____
_____. (name(s) of person(s))

Notary Public - State of Oregon

My commission expires: _____

