

CITY OF RIVIERA BEACH
DEVELOPMENT SERVICES DEPARTMENT
PLANNING & ZONING DIVISION
600 WEST BLUE HERON BLVD.
RIVIERA BEACH, FL 33404
561.845.4060

CONSENT FORM

INSTRUCTIONS: consent is required from the property owner(s) and contract purchaser, if applicable, to an agent if the property owner(s) or contract purchaser does not intend to attend all meetings and public hearings and submit in person all material pertaining to the application. A separate form is required from each owner/contract purchaser. Consent to a firm shall be deemed consent for the entire firm, unless otherwise specified. Consent is valid for one year from date of notary, unless otherwise specified. Attach copy of last recorded warranty deed for subject property.

Project Name:	Submittal Date:
This form shall serve as CONSENT for the agen all documents for the following application(s) affer	nt identified below to prepare or have prepared and submit ecting property I have an ownership interest in:
☐ Special Permit ☐ Special Event	
and documents, and to attend and represent me	(type, stamp or print clearly full repaired material e at all meetings pertaining to the application(s) indicated the party designated above to agree to all terms and yal of this application for the proposed use of:
application. I further certify the statements or in are true and correct to the best of my knowled attachments become official records of the Deve Florida, and will not be returned. I understand the by me or my agent will result in the denial, re request, approval or permits. I acknowledge the application. I further consent to the City of Rivie	erty I have an ownership interest in is the subject of this formation made in any paper or plans submitted herewith ge. I understand this application, related material and all lopment Services Department of the City of Riviera Beach, at any false, inaccurate or incomplete information provided evocation or administrative withdrawal of this application, at additional information may be required to process this era Beach to publish, copy or reproduce any copyrighted ion for any third party. I further agree to all terms and approval of this application.
OWNER/CONTRACT PURCHASER INFORMA	TION: I am the ☐ Owner ☐ Contract Purchaser
(Name - type, stamp or print clearly)	(Signature)
(Address)	(City, State, Zip)
AGENT INFORMATION:	
(Name - type, stamp or print clearly)	(Name of firm)
(Address)	(City, State, Zip)
NOTARY PUBLIC INFORMATION:	STATE OF FLORIDA COUNTY OF PALM BEACH
(name of person	fore me thisday of, 20by acknowledging). He/she is personally known to me or has dentification) as identification and did/did not take an oath
(Name - type, stamp or print clearly)	(Signature)
My Commission Expires on:	

NOTARY'S SEAL OR STAMP