

EAST ALLEN TOWNSHIP

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AUTHORIZATION FORM

The following individual(s) and/or entity/entities is/are authorized to represent our interest in this matter before the Planning Commission and/or Board of Supervisors for this application:

Project Name

Owner (Printed)

Authorized Agent (Printed)

Signature

Signature (Capacity i.e. equitable owner/engineer/attorney)

SWORN TO AND SUBSCRIBED BEFORE ME
THIS _____ DAY OF _____ 20____

Notary

My Commission Expires: