



*Department of
Building & Planning*
Phone: (610) 645-6140
fax: (610) 649-9598

Township of Lower Merion

OWNER AUTHORIZATION FORM

Please check applicable process:

Subdivision

Land Development

Waiver/Amendment

I (we) as the owner(s) of parcel number _____
situated at:

_____ *Street Address*

_____ *Post Office*

_____ *Zip Code*

recorded in the Montgomery County Office of the Recorder of Deeds, in Deed Book _____

Page(s) _____, hereby authorize _____
Agent (print)

to file and process the attached application(s) on my behalf:

_____ *Property owner's signature*

_____ *Date*

_____ *Property owner's signature*

_____ *Date*

Mailing Address (if different than above):

_____ *Street Address*

_____ *Post Office*

_____ *Zip Code*