



SAMPSON COUNTY

PLANNING & INSPECTIONS



Planning: (910) 631-1039
Inspections: (910) 592-0146



Planning: planning@sampsoncountync.gov
Inspections: inspections@sampsoncountync.gov



Address: 335 County Complex Rd, Bldg D Clinton, NC 28328
Hours of Operation: Monday – Friday, 8am – 5pm

OWNER'S CONSENT FORM

Consent is required from the property owner(s) if an agent will act on their behalf. A separate form is required from each owner. Consent is valid for one year from date of notary, unless otherwise specified. All fields must be completed.

PROJECT NAME: _____

SITE ADDRESS/LOCATION: _____

PIN(S): _____ DEED BOOK/PAGE: _____ / _____

APPLICANT/AGENT NAME: _____

OWNER AUTHORIZATION

I hereby give CONSENT to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents, and to attend and represent me at all meetings and public hearings pertaining to the following processes (please specify applications—major subdivision, zoning permit, sign permit, rezoning, Special Use Permit, etc.):

Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application. I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application. If the property owner is a North Carolina LLC, the individual signing this form must be listed as a company official on the North Carolina Secretary of State's website. Additional verification may be required.

Owner's Name (please print)

Owner's Address

Owner's Signature

City, State, Zip

NORTH CAROLINA

COUNTY OF _____

I, a Notary Public of the County and State aforesaid, do hereby certify that _____ (the "Signatory") personally came before me this day and acknowledged the due execution of the foregoing Affidavit.

Witness my hand and official seal or stamp this ____ day of _____, 20__.

Affix notary seal or stamp here:

NOTARY PUBLIC OFFICIAL SIGNATURE: _____

PRINTED OR TYPED NAME: _____

MY COMMISSION EXPIRES: _____