



**Natural Resources Authorized Agent Consent**  
(If applicant is other than owner)

\_\_\_\_\_  
(Print name of all property owners)

1. That (I am/we are) the owner(s) and record title holder(s) of the following described property, to wit:

Address or general location: \_\_\_\_\_ Folio No(s): \_\_\_\_\_

2. That this property constitutes the property for which a request for a:

\_\_\_\_\_ (Nature of request)  
is being applied to the Board of County Commissioners, Hillsborough County.

3. That the undersigned (has/have) appointed \_\_\_\_\_  
as (his/their) agent(s) to execute any permits or other documents necessary to affect such permit.

4. That this consent has been executed to allow Hillsborough County, Florida, to consider and act on the above-described property;

5. That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.

\_\_\_\_\_  
Signed (Property Owner)

\_\_\_\_\_  
Signed (Property Owner)

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Type or Print Name