



DATE _____

CERTIFICATE OF OWNER'S REPRESENTATIVE
TOWN OF AMHERST
POST OFFICE BOX 280
AMHERST, VIRGINIA 24521
(804) 946-7885

Property Owner	
Company	
P.O. Box	
City, State, Zip	
E-mail Address	
Telephone	
Fax	

This is to confirm that I am the owner of the property described as follows:

Deed Book/Page Number	
Tax Map Number	
Street Address	
Other Description	

and that I hereby make, constitute and appoint:

Representative	
Company	
P.O. Box	
City, State, Zip	
E-mail Address	
Telephone	
Fax	

my true and lawful agent and in my name, place and stead giving unto this individual full power and authority to do and perform all acts and make all representation necessary, without any limitation whatsoever, to make application for zoning change(s), special use permit(s), and/or variance(s) for the property referenced herein. The right, powers, and authority of said agent herein granted shall commence and be in full force and effect as of the date this is signed and shall remain in full force and effect thereafter until actual notice is received by the Town Manager of the Town of Amherst stating that the terms of this power have been revoked or that another individual has been appointed as my representative.

 Owner (SEAL)

STATE OF VIRGINIA AT LARGE, TO WIT:
 CITY/COUNTY OF _____

I, _____, a Notary Public in and for the State of Virginia At Large do hereby certify that _____ signed the foregoing instrument before me this ____ day of _____, _____.

 Notary Public

My Commission Expires: _____