

CITY OF FIFTY LAKES PLANNING & ZONING  
AUTHORIZED AGENT FORM

I hereby authorize \_\_\_\_\_  
Agent / Contractor (please Print)

\_\_\_\_\_  
Contractor's License Number

\_\_\_\_\_  
Contractor's Phone Number

To act as my authorized agent to purchase zoning / sewer permits or other purposes as specified on my property located at:

Real Estate Code \_\_\_\_\_ Section: \_\_\_\_\_

Site address \_\_\_\_\_

\_\_\_\_\_  
Property Owner(s) Signature Date

Property Owner's last name (please print) \_\_\_\_\_

Property Owner's Phone Number \_\_\_\_\_

City of Fifty Lakes Planning & Zoning  
40447 Town Hall Road  
Fifty Lakes, MN 56448  
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PZ50LAKES@EMILY.NET