

\_\_\_\_\_  
(DATE)

**City of Westminster  
Community Development Department  
Planning Division  
4800 W 92<sup>nd</sup> Avenue  
Westminster, CO 80031**

**RE: Authorization for consultant to apply for Planning Project on eTRAKiT**

To whom it may concern,

I, \_\_\_\_\_,  
(OWNER'S NAME)

am the legal owner of the property described as:

\_\_\_\_\_  
(PROPERTY ADDRESS OR ASSESSOR'S PARCEL NUMBER)

I do hereby grant

\_\_\_\_\_  
(CONSULTANT'S NAME AND COMPANY)

the authority to apply for and modify submissions for:

- |   |   |
|---|---|
| <input type="checkbox"/> Comp Plan Amendment    | <input type="checkbox"/> Rezoning           |
| <input type="checkbox"/> PDP                    | <input type="checkbox"/> PDP Amendment      |
| <input type="checkbox"/> ODP                    | <input type="checkbox"/> ODP Amendment      |
| <input type="checkbox"/> ODP Waiver             | <input type="checkbox"/> Special Use Permit |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Variance           |
| <input type="checkbox"/> Sign Variance          | <input type="checkbox"/> Telecom Permit     |
| <input type="checkbox"/> Annexation             |   |

Should you have any other questions or need further clarification, please contact me at:

\_\_\_\_\_  
(OWNER'S PHONE NUMBER and/or OWNER'S E-MAIL ADDRESS)

Sincerely,

\_\_\_\_\_  
(OWNER'S SIGNATURE)

\_\_\_\_\_  
(OWNER'S NAME)

\_\_\_\_\_  
(OWNER'S TITLE)