

**Authorization Form for Corporation**

I/we, the undersigned, \_\_\_\_\_, (mark one)  individually or as the  President  
 Vice President or  Partner of

\_\_\_\_\_,  
and as the  Applicant  Owner hereby authorize \_\_\_\_\_

\_\_\_\_\_  
to act as my/our agent in connection with the  Rezoning  
 Comprehensive Plan Amendment  Special Use Permit  Temporary Use Permit  
 Conditional Use Permit  Operating Permit  Other: \_\_\_\_\_

\_\_\_\_\_  
on the following described property located in Sumter County, Florida, legally described as follows:

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_.

Signature \_\_\_\_\_

Printed Name: \_\_\_\_\_

State of Florida  
County of \_\_\_\_\_

SWORN TO and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_, by  
\_\_\_\_\_, personally known to me to  
the person(s) named above or who produced the following identification:

\_\_\_\_\_  
\_\_\_\_\_.  
\_\_\_\_\_ (Seal)

Notary Public, State of Florida  
My Commission expires: \_\_\_\_\_