



PLANNING AND BUILDING DEPARTMENT
AFFADAVIT OF LEGAL INTEREST and
LETTER OF AUTHORIZATION

\_\_\_\_\_, "Owner" whose address is \_\_\_\_\_
City State Zip

As owner of property more specifically described as:
\_\_\_\_\_
\_\_\_\_\_

HEREBY AUTHORIZES \_\_\_\_\_ as Agent to represent and act
for the Owner in making application for and receiving and accepting on Owners behalf, any permits or other action by the Teton County
Commissioners, Teton County Planning and Zoning, Building, and or other County Departments relating to the modification, development,
planning, platting, re-platting, improvements, use or occupancy of land in Teton County, Idaho. Owner agrees that; Owner is or shall be deemed
conclusively to be fully aware of and to have authorized and/or made any and all representations or promises contained in said application of any
Owner information in support thereof, and shall be deemed to be aware of and to have authorized any subsequent revisions, corrections or
modifications to such materials. Owner acknowledges and agrees that; Owner shall be bound and shall abide by the written terms or conditions of
issuance of any such named representative, whether actually delivered to Owner or not. Owner agrees that no modification, development, platted
or re-platting, improvement, occupancy, or use of any structure or land involved in the application shall take place until approved by the
appropriate official of Teton County, Idaho, in accordance with applicable codes and regulations.

Owner agrees to pay any fines and be liable for any other penalties arising out of failure to comply with the terms of any permit or arising
out of any violation of applicable laws, codes, or regulations applicable to the action sought to be permitted by the application authorized herein.

Under penalty of perjury, the undersigned swears that the forgoing is true and, if signing on the behalf of a corporation, partnership,
limited liability company or other entity, the undersigned swears that this authorization is given with the appropriate approval of such entity, if
required.

OWNER:

X \_\_\_\_\_ Title \_\_\_\_\_
(Signature of Owner) (Print Name)

X \_\_\_\_\_ Title \_\_\_\_\_
(Signature of Co-Owner) (Print Name)

X \_\_\_\_\_
(Secretary or Corporate Owner)

\_\_\_\_\_  
(Print Name)

NOTARY: STATE OF: \_\_\_\_\_ SS. \_\_\_\_\_

COUNTY OF: \_\_\_\_\_ Zip \_\_\_\_\_

Subscribed and sworn to before me by \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

(seal)

WITNESS my hand and official seal.

X \_\_\_\_\_ Expiration Date \_\_\_\_\_
Notary Public