



Office of
Planning and Development

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LANDOWNER/AGENT CONSENT FORM

I(we) the undersigned owner(s) of record of parcel no. _____,
located at (physical address): _____,
consent to and authorize (agent name), _____,
to act on my/our behalf for the purposes of obtaining approval for (development type):

submitted to the Okanogan County Office of Planning and Development.

I(we), as landowners of the above described property understand and agree to the following:

- I(we) are legal owners of the subject property and may act on behalf of any and all interested parties, financial and otherwise;
- I(we) are responsible for all activities occurring on the subject property;
- Okanogan County, its officers, and staff shall not be held liable for any activities arising from the actions of the above named agent;

Landowner

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

Signature: _____ Date: _____

Authorized Agent

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

Signature: _____ Date: _____

Landowner

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

Signature: _____ Date: _____

Landowner

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

Signature: _____ Date: _____

If additional landowners, additional forms may be attached.