AFFIDAVIT TO BE COMPLETED BY APPLICANT/OWNER

State of _____ }
} ss:
County of _____ }

_____ being duly sworn, deposes and says:

1. That he/she resides at _____ in the County of _____ and the State of _____. That he/she is the Owner / Agent of the Owner of the within property as described in the foregoing application for Subdivision / Site Plan / Special Use Permit approval(s) and that the statements contained therein are true to the best of his/her knowledge and belief.

2. That we hereby authorize _____, of _____, to act as our representative in all matters regarding the application that may come before the Town of Washington Planning Board.

3. That he/she has the legal right to make or authorize the making of said application.

4. That he/she understands that the Town of Washington Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury he/she declares that he/she has examined this affidavit and that it is true and correct.

_____ _____
Applicant/Owner Applicant/Owner

_____
Notary Public