



# City of Albany



## AUTHORIZATION FOR APPLICATION FOR PERMIT(S) BY OTHER THAN OWNER OR LICENSED CONTRACTOR

TO: Community Development Department  
City of Albany  
1000 San Pablo Ave.  
Albany, CA 94706  
(510) 528-5760  
(510) 524-9359 fax

I, as the owner of the property, understand or have been informed that the application for a Building Permit must be signed by a licensed contractor, the owner of the property or his/her duly authorized agent.

I am also aware that I may designate a third party, such as a tenant or person in my employ, to sign the application for a permit on my behalf. I understand that the person's only responsibility or function is to acquire a permit on my behalf.

**I am aware that the responsibility for the construction and compliance with codes and ordinances is entirely mine and I agree to accept this responsibility.**

Therefore, as owner of the property located at \_\_\_\_\_  
(Property Street Address)

\_\_\_\_\_, Albany, CA, I hereby authorize \_\_\_\_\_ to  
(Agent's Name)

obtain a Building Permit to \_\_\_\_\_  
(Describe work on Permit)

in my name by signing his/her name on the Permit application.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Owner's E-mail Address (opt.): \_\_\_\_\_

**NOTE: This authorization expires 180 days from the above signature date.**