CERTIFICATION

NOTE: ALL APPLICATIONS MUST HAVE SIGNATURE(S) OF THE CURRENT PROPERTY OWNER(S) OR INDIVIDUAL WITH THE PROPER POWER OF ATTORNEY, NOTARIZED BY A CERTIFIED NOTARY PUBLIC (attach proof if necessary).

Part A: Owner's Signature and Consent

I/we, _____ being duly sworn, depose and say that I/we am/are the owner, owners, authorized representative for a corporate owner, person with power of attorney for the owner/owners, or a non residential tenant of said property. I/we personally swear and affirm that this application has been prepared in compliance with the requirements of the City of West Des Moines Municipal code as printed herein and that the statements and information above referred to are in all respects true and correct to the best of my/our knowledge and belief. Further, I/we hereby submit this development application for review and consideration by the City of West Des Moines, Iowa in compliance with the requirements of the City of West Des Moines Municipal Code.

I/we, _____ agree to grant the City permission to access said property for purposes of installing Public Notice sign(s) and completing the necessary on-site inspections, if applicable.

_____ _____
Signature of Legal Property Owner Date

EIN (Employer Identification Number) or SSN (Social Security Number) _____

The above signed applicant appeared before me and personally subscribed and sworn before me on this _____ day of _____, 20____.
My commission expires on the _____day of _____, 20 ___.

*Signature of Notary Public:*_____

Part B: Applicant's Signature and Consent
(Use only if the applicant is different from Property Owner.)

I/we, _____ being duly sworn, depose and say that I/we hold legal interest in this property and do hereby submit this development application for review and consideration by the City of West Des Moines, Iowa in compliance with the requirements of the City of West Des Moines Municipal Code.

I/we, _____ agree to grant the City permission to access said property for purposes of installing Public Notice sign(s) and completing the necessary on-site inspections, if applicable.

_____ _____
Signature of Applicant Date

EIN (Employer Identification Number) or SSN (Social Security Number) _____

The above signed applicant appeared before me and personally subscribed and sworn before me on this _____ day of _____, 20____.
My commission expires on the _____day of _____, 20 ___.

*Signature of Notary Public:*_____