## Town of Rhinebeck Application Certification and Authorization

## CERTIFICATION OF APPLICANT for Town Board, Planning Board, Zoning Board of Appeals and Building Department

Application Name:	Application/Appeal No
State of New York )	
State of New York )	SS:
County of)	
, <u> </u>	
	at all of the statements and factual information in the attached r documents submitted in connection with this application, are true and
	agree that the submission of false or inaccurate information to this
	ult in the denial of my application or in the revocation of permits or
	this statement is made under oath.
	Applicant signature:
	Applicant name (printed):
	Applicant address:
Sworn to before me this	day
of, 20_	<u>_</u> .
Notary Public	
,,	AFFIDAVIT OF OWNER
	if the person appearing before the Board/Department is not the Owner. mited to, any consultants for Owner, contract vendees, lessees etc.)
State of New York )	
)	SS:
County of	
I hereby depose and say tha	at I reside at in the County of in the property which is the
, State of	hich is located at the address commonly known as
	and which bears the following tax grid identification number(s):
	I baraby authoriza
	to appear before this Board/Department on my behalf
and I state under oath that t	he statements and information to be provided on my behalf by that
person are accurate and tru	e.
	Owner signature:
	Owner name (printed):
Sworn to before me this	day
of, 20_	
	<del></del> ;
Notary Public	