



Community Development Department

21201 La Puente Road • Walnut, CA 91789 Tel: 909.595.7543 • Fax: 909.595.8443

www.ci.walnut.ca.us

Development Application

nnd Use		
Project Description		
Applicant's Representative (if applicable):		

Certification

Property Owner Authorization:

I certify, under penalty of perjury, that I am the owner of record for the subject property and hereby give my consent to the filing of this application. I further certify that the information provided is, to the best of my knowledge, true and correct. I further acknowledge that, pursuant to Government Code Section 65105, City staff may enter upon the subject property to make examinations and surveys in connection with the proposed application, provided that such entry, examination or survey, does not interfere with the use of the property.

PROPERTY OWNER SIGNATURE*:	DATE:
PROPERTY OWNER NAME (PRINT):	
* Property Owner Signature must be notariz Acknowledgement form	zed. Complete below or attach a separate Notary
STATE OF CALIFORNIA)	
COUNTY OF LOS ANGELES)	
On thisday of	20, before me the, personally cory evidence) to be person(s) whose name(s) is/are subscribed to the
within instrument and acknowledged to me that (s)he/th	dory evidence) to be person(s) whose name(s) is/are subscribed to the chey executed the same in their authorized capacity, and that by their upon behalf of which the person(s) acted, executed the instrument.
WITNESS n	my hand and official seal.
Notary Publi	ic in and for said State
Applicant Authorization:	
I further certify that the information provided is, to the pursuant to Government Code Section 65105, City	thorization from the property owner of record to make such application. the best of my knowledge, true and correct. I further acknowledge that, staff may enter upon the subject property to make examinations and in, provided that such entry, examination or survey, does not interfere
APPLICANT SIGNATURE:	DATE:
APPLICANT NAME (PRINT):	
<u>For</u>	Office Use Only
Case Nos.	Accepted by: