

**Authorization To Act As Agent/Representative
Board of Zoning Appeals (BZA)
Bedford Township
Temperance, MI 48182-0670**

I _____ (Print) do hereby authorize:
(First Name) (Middle Initial) (Last Name)

_____ (Print) to act as agent on
(First Name) (Middle Initial) (Last Name)

my behalf and to speak for me with regard to my application before

the Bedford Board of Zoning Appeals (BZA) on _____.
(Meeting Date)

I further understand that all information and statements given by my agent/representative, who is
identified above, are binding to me in the future.

_____ (Signed) _____
(First Name) (Middle Initial) (Last Name) (Month-Day-Year)

SUBSCRIBED AND SWORN BEFORE ME, THIS
_____ DAY, _____ MONTH, _____ YEAR.

A NOTARY PUBLIC IN AND FOR _____ COUNTY,
STATE OF _____, MY COMMISSION

EXPIRES _____, SIGNATURE _____
(Month-Day-Year) (First Name) (Middle Initial) (Last Name)
