

**BUILDING DIVISION**  
Phone (707)257-9540  
Fax (707)257-9522  
Inspections (707)257-1063

**ENGINEERING DIVISION**  
Phone (707)257-9520

**Community Development Department**



**NAPA FIRE DEPARTMENT  
FIRE PREVENTION DIVISION**

Phone (707)257-9590

**PLANNING DIVISION**

Phone (707)257-9530

**OFFICE USE ONLY**

**PERMIT #:** \_\_\_\_\_

**AGENT AUTHORIZATION**

*Only the owner, contractor, or agent authorized by the owner (owner's agent) may submit plans for permits. To authorize a third party agent, the agent must bring this form, wet-signed by the owner or contractor, or a wet signed letter from the owner or contractor, which identifies them and the person they are representing, and for what jobs they may obtain permits. The letter must contain all the information requested in this form. The agent shall be able to present valid identification.*

*This form must accompany ALL applications that are being filed by an owner's agent.*

**FAXES ARE NOT ACCEPTED.**

As owner of the property, I understand that the application for any permit (i.e. Building, Plumbing, Mechanical, and/or Electrical) must be signed by the owner of the property, his/her duly authorized agent, or licensed contractor. This procedure also applies to the agent for a contractor.

I understand 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 further 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 to codes and ordinances is entirely mine and I accept the same.

**I do hereby authorize** (please print agent name): \_\_\_\_\_

**To apply/obtain a building permit for** (address): \_\_\_\_\_, **in my name by affixing my name followed by their signature on the application.**

**Owner/Contractor** (print name): \_\_\_\_\_

**Owner/Contractor Signature:** \_\_\_\_\_

**Owner/Contractor Address:** \_\_\_\_\_

**Owner/Contractor City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Owner/Contractor Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Contractor State License Number:** \_\_\_\_\_