

DECLARATION AND SIGNATURES

**PLANNING & COMMUNITY
SERVICES DEPARTMENT
316 N 26TH STREET, 5TH FLOOR
BILLINGS, MONTANA 59101
PHONE: (406) 247-8676 EMAIL: PLNONLINE@BILLINGSMT.GOV**



APPLICANT/AGENT INFORMATION					
PROPERTY OWNER					
E-mail Address		Mobile Phone		Home Phone	
Mailing Address					
AGENT					
E-mail Address		Mobile Phone		Business Phone	
Mailing Address					

The submission of this application constitutes a grant of permission by the property owner for Planning staff to enter the subject property during the review process.

This property is legally described as:

And generally located at:

I declare that I am the owner of record of the above-described property and have examined all statements and information contained herein and all attached exhibits. To the best of my knowledge and belief, this is true and correct.

OWNER OF RECORD / DATE

OWNER UNDER CONTRACT / DATE