

# The City of Boynton Beach



**Development Department  
Planning & Zoning Division**  
100 East Ocean Avenue  
Boynton Beach, Florida 33425-0310  
(P): 561-742-6260  
www.boynton-beach.org

## OWNER'S CONSENT FORM

\_\_\_\_\_, the ☐ sole owner or ☐ partial owner of record of the property legally described as:

**Property Owner's Name**

*If additional space is needed for the legal description, please check here ☐ and attach additional pages as necessary.*

Street Address: \_\_\_\_\_ City: Boynton Beach State: FL Zip Code: \_\_\_\_\_

PCN: \_\_\_\_\_ states that he/she has thoroughly examined and is

familiar with the application submitted to the City of Boynton Beach Development Services Department – Planning and

Zoning Division, submitted by \_\_\_\_\_ on behalf of \_\_\_\_\_,

and expressly consents to the use of the subject property for the purpose described in the application.

\_\_\_\_\_  
**Signature (must be original signature)**

### This Section must be completed by the Public Notary

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the foregoing instrument was sworn to and subscribed before me

by *If individual:* ☐ \_\_\_\_\_, and individual  
(Name of Person Acknowledging)

*If corporation:* ☐ \_\_\_\_\_, as \_\_\_\_\_  
(Name of Person Acknowledging) (Position, Type of Authority, Officer)

For \_\_\_\_\_ ☐ Personally, Known or ☐ Produced Identification \_\_\_\_\_  
Type of Identification

\_\_\_\_\_  
*Signature of Notary Public*

\_\_\_\_\_  
*Name of Notary Printed and Commission Number*

*Place Notary Seal Stamp Above*