

TOWN OF SHELBY
Authorization to
Submit Application
on Behalf of Property Owner

OFFICE USE ONLY
Application No. _____
Date of Application _____ (Postmarked or Hand Delivered)
Date of Receipt by Board: _____
Date of Public Hearing: _____
Date of Final Action: _____
Date of Filing of Decision with the Town Clerk _____

I _____ give my permission to _____
(Name of Property Owner) (Name of Applicant)

to submit an application for a _____ to the Town of _____
for the property located at _____
(Address of Property)

Name of Property Owner (Print)

Signature of Property Owner

Name of Applicant (Print)

Signature of Applicant

Date

Date

Attach completed form to application

TOWN OF SHELBY
REQUEST TO VIEW PUBLIC RECORDS
UNDER THE FREEDOM OF INFORMATION LAW

TO: RECORDS ACCESS OFFICER OF THE TOWN OF SHELBY

I HEREBY REQUEST TO VIEW THE FOLLOWING RECORD(S):

(Signature) / /
(Date)

(Representing) _____
(Time)

(Mailing Address) COPIES OF ANY OF THE ABOVE?
YES _____ NO _____

FOR AGENCY USE ONLY

APPROVED RECORDS OF WHICH THIS AGENCY IS LEGAL CUSTODIAN CANNOT BE
FOUND

DENIED RECORDS REQUESTED ARE NOT MAINTAINED BY THIS AGENCY

Number of pages to be copied: _____ (up to 8 1/4" by 14")

Total fee @ .75cents per page: \$ _____ Received Payment: ____/____/____

(Signature) _____ / /
(Title) (Date)

NOTICE: You have a right to appeal a denial of this application to the head of this agency,

(Name) _____
(Title)

(Business Address)

who must fully explain in writing within seven days in receipt of appeal.

I HEREBY APPEAL:

(Signature) / /
(Date)

RECORD(S) ARE AVAILABLE DURING REGULAR BUSINESS HOURS:
MONDAY THROUGH FRIDAY FROM 9AM UNTIL 4:30 PM SATURDAY 9AM UNTIL NOON