Street-Use and Mapping
T. 628.271.2000 | 49 South Van Ness Ave. 3rd Floor, San Francisco, CA 94103

CERTIFICATION OF AUTHORIZED AGENT

_____
[Project Address] **[Block]** **[Lot]** **[Zip Code]**

Public Works Permit Number (s) _____

Building Permit Application (BPA) Number _____

I/We, _____, hereby certify for the purpose of
[Name of Property Owner(s) – Print]

completing and submitting an application for street/sidewalk-use permit(s) with San Francisco Public Works, Bureau of Street-Use and Mapping, and for the completion of any form related to the San Francisco Public Works Code and/or to any City and County Ordinances and regulations, or State Codes, I/we are authorizing

_____ to sign all documents
[Name of Agent(s) – Print]

connected with this application(s) or permit(s).

I/We also acknowledge that certain permits for encroachments within the public right of way incur annual assessment fees and will be recorded against property title for life of encroachment.

_____
[Authorized Agent Signature] **[Phone Number]**

_____
[CA Contractor, Driver's or SF Business License number] **[Date]**

_____
[Property Owner Signature] **[Phone Number]** **[Date]**