



Crestview Community Redevelopment Agency
198 Wilson Street N.
Crestview, FL 32536
850-682-1560

PROPERTY OWNER AUTHORIZATION FORM

• To be completed only if the applicant is a tenant •

The undersigned owner of the existing building located at:

Address

Certifies that:

Applicant

Operates a business at the above location. The undersigned agrees to permit the Applicant and his contractors or agents to implement the improvements listed on the Beautification Incentive Program Grant Application.

I understand and agree that neither the Crestview CRA nor the City of Crestview assume responsibility or liability to me or any other part for any action or failure of any contractor or other third party and in no way guarantee any work to be done or material to be supplied. In consideration of the Beautification Incentive Program Grant to complete exterior property improvements of the commercial property, the undersigned hereby waives and releases any claim against the City of Crestview and the Crestview Community Redevelopment Agency (CRA) arising out of the use of said funds for the purposes set forth in the Application. The undersigned agrees to hold the City and the CRA harmless for charges, damages, claims or liens arising out of the Applicant's participation in the Beautification Incentive Program.

Property Owner Name

Property Owner Signature

Date

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ (numeric date) day of _____ (month), _____ (year), by _____ (name of person acknowledging).
(Seal)

Signature of Notary Public

Print, Type/Stamp Name of Notary

Personally known: _____

OR Produced Identification: _____

Type of Identification Produced: _____