



Variance Request

Owner's Authorization Form

Owner's Authorization

Applicant Name YOLONDA E SIMPSON Applicant's Address 5374 SILVER WOODS WALK POWDER SPRINGS GA 30127

Property Address 5374 SILVER WOODS WALK Powder Springs, GA Property PIN _____

This is to certify that I am or We are or I am the Authorized Representative of a Corporation that is the owner of a majority interest in the subject property of the attached application. By execution of this form, this is to authorize the person names as "applicant" below, acting on behalf of the owner, to file for and pursue a request for approval of the following:

Check all that apply:

Rezoning <input type="checkbox"/>	Special Use <input type="checkbox"/>	Hardship Variance <input checked="" type="checkbox"/>
Special Exception <input type="checkbox"/>	Flood Protection Variance <input type="checkbox"/>	Appeal of Administrative Decision <input type="checkbox"/>

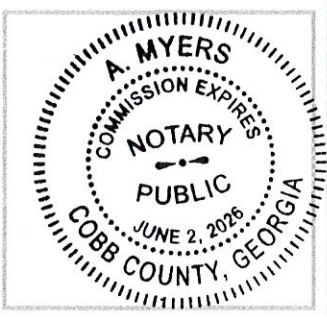
Signature of Property Owner(s)

Signature of Owner Yolonda E. Simpson Printed Name YOLONDA E. SIMPSON Date 9.20.22

State of GA, County of Cobb.

This instrument was acknowledged before me this 20 day of September 2022

20 22, by Yolanda Simpson. Identification Presented: Known to me



Signature of Notary Public [Signature] Name of Notary Public A. Myers My Commission Expires 6/2/2026

Signature of Owner _____ Printed Name _____ Date _____

State of _____, County of _____.

This instrument was acknowledged before me this _____ day of _____ month.

20 _____, by _____ name of signer. Identification Presented: _____.

Signature of Notary Public _____ Name of Notary Public _____ My Commission Expires _____

