



**city of  
powder springs**  
**Special Use Request**  
**Owner's Authorization Form**

### Owner's Authorization

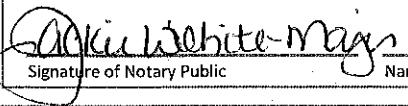
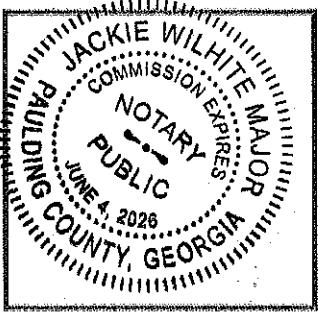
Applicant Name	Murrell White		Applicant's Address	1344 Willamette Way	
Property Address	3982 Austell Powder			Powder Springs, GA	Property PIN

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 checked="" type="checkbox"/>	Hardship Variance <input 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	Printed Name	Date
 <span>MOISES CARDENAS</span> <span>10-14-25</span>		
State of <u>GA</u> , County of <u>Cobb</u> This instrument was acknowledged before me this <u>14</u> day of <u>October</u> .		
20 <u>25</u> by _____	name of signer	Identification Presented: <u>Drivers license</u>
 <span>Jackie Wilhite-Mays</span>		Name of Notary Public My Commission Expires
		

Signature of Owner	Printed Name	Date
State of _____, County of _____.		
This instrument was acknowledged before me this _____ day of _____.		
20 _____ by _____	name of signer	Identification Presented: _____
Signature of Notary Public		Name of Notary Public My Commission Expires



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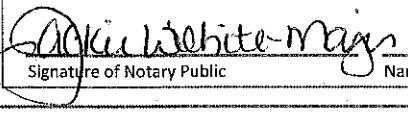
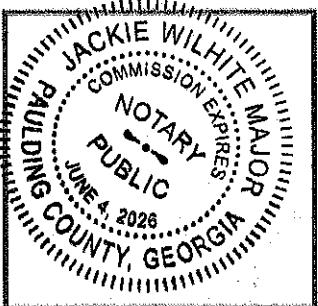
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### Signature of Property Owner(s)

Signature of Owner	Printed Name	Date
 <b>Moises Cardenas</b> <b>10-14-25</b>		
State of <b>GA</b> , County of <b>Cobb</b> This instrument was acknowledged before me this <b>14th</b> day of <b>October</b> , <b>month</b> .		
20 <b>25</b> by _____	name of signer	Identification Presented: <b>Drivers license</b>
 <b>Jackie Wilhite-Mays</b>		Name of Notary Public: _____ My Commission Expires: _____
		

Signature of Owner	Printed Name	Date
State of _____, County of _____.		
This instrument was acknowledged before me this _____ day of _____, _____.		
20 _____ by _____	name of signer	Identification Presented: _____
Signature of Notary Public: _____		Name of Notary Public: _____ My Commission Expires: _____