



Town of Plymouth  
**Department of Inspectional Services**  
26 Court Street  
Plymouth, Massachusetts 02360  
508-322-3431

## Owners Authorization Form

**Statement of Ownership:** I hereby certify that I am the owner of the property described below:

**Address:** \_\_\_\_\_

\_\_\_\_\_

**And or Authorize the Agent/Contractor below to perform work at above listed address**

**Name of Authorized Agent/Contractor** \_\_\_\_\_

\_\_\_\_\_

***Owners' Signature Below:***

**Sign:** \_\_\_\_\_

**Print:** \_\_\_\_\_

**Date** \_\_\_\_\_