



# AUTHORIZATION

## PROPERTY OWNER, LESSEE AND/OR PROPERTY MANAGER DONATION BOX AUTHORIZATION FORM

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

My name is \_\_\_\_\_. I am providing this letter in compliance with the City of Arlington's ordinance Donation Boxes, Article III, Section 3.03 (B) which states that the real property owner, lessee and/or property manager must provide written authorization allowing the donation box on the property. This letter serves as authorization that the real property described by the address stated above may be used to place and maintain a donation box.

Select One:

I am the owner of the real property.

I am the lessee.

I am the property manager.

My complete address, including city, state and zip code is: \_\_\_\_\_

My phone number where I can be contacted during regular business hours is: \_\_\_\_\_

### NOTARY INFORMATION

I understand and agree that any false statements herein shall immediately void this authorization and result in the denial and/or revocation of any permit associated with this authorization form.

Signature: \_\_\_\_\_

STATE OF TEXAS

TARRANT COUNTY

BEFORE ME, the undersigned authority \_\_\_\_\_, on this day personally appeared and after me being duly sworn states under oath that all the above and foregoing statement and each part thereof is true and correct.

ACKNOWLEDGED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, IN THE YEAR \_\_\_\_\_

FOR OFFICE

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

AMANDA Sequence Number: \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of Texas