

**SPECIAL POWER OF ATTORNEY**

Application No: \_\_\_\_\_

Tax Map Number(s): \_\_\_\_\_

Property Description (Street Address, if assigned, or Common Description, Borough): \_\_\_\_\_

Nature of application: \_\_\_\_\_

I/we\* \_\_\_\_\_, am/are

the applicant(s) for the above referenced application;  the owner(s) of the property described above and I/we do hereby make, constitute, and appoint \_\_\_\_\_

\_\_\_\_\_, my true and lawful attorney-in-fact, and grant unto my attorney-in-fact full power and authority to make application for the application described above, and to perform all acts and make all representations as such person shall deem necessary or appropriate in regard to said application, without any limitation whatsoever, including but not limited to the following authority:

1. *Rezoning applications:* to submit proffers that would constitute binding conditions on the rezoning of the property, including limitations on its use, and to modify or amend any documents in whole or in part relating to the application.
2. *Conditional Use Permit applications:* to offer conditions to which the proposed use of the property would be subject; and to modify or amend any documents in whole or in part relating to the application.

The rights, powers, and authority of said attorney-in-fact herein granted shall commence and be in full force and effect on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and shall remain in full force and effect thereafter until actual notice, by certified mail, return receipt requested is received by the Planning Department of the City of Chesapeake stating that the terms of this power have been revoked or modified.

**Applicant/Owner:**

**Applicant/Owner:**

sign \_\_\_\_\_

sign \_\_\_\_\_

Name, Title \_\_\_\_\_

Name, Title \_\_\_\_\_

Company \_\_\_\_\_

Company \_\_\_\_\_

Commonwealth/State of \_\_\_\_\_

City of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

Notary Registration No. \_\_\_\_\_

My commission expires: \_\_\_\_\_

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- \* If the owner or applicant is a corporation, partnership, or similar entity, documentation must be attached which establishes that the person signing on behalf of the entity has the authority to act on behalf of and to bind that entity.