




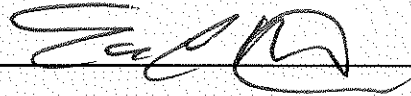
Town of Rolesville Planning Department
Property Owner Consent & Authorization Form
planning@rolesvillenc.gov

Consent is required from the property owner(s) or legal representative. Unless otherwise specified, consent is valid for one year from the date of application.

Please provide a separate form for each parcel number. For properties with multiple owners, an individual form must be completed for each owner. (A husband and wife may both sign and submit one form.)

Project/ Subdivision Name: Rolesville Town Campus
Site Address: 408 East Young Street, Rolesville, NC 27571
Parcel ID: _____ Deed Reference: REF: D.B. 18568, PAGE 660
PIN: 1768098727, 1768094465, 1769101402, 1769101390, 1769102240 REF: B.M. 2008, PAGE 651
REAL ID: 0012313, 0106105, 0012316, 0041554, 0006343

Financially Responsible Party ***This field is required.**
Name: Eric Marsh Signature: 
(type or print clearly)
Company Name: Town of Rolesville Title: Town Manager
Mailing Address: 502 Southtown Circle City/State/Zip: Rolesville
Phone: 9842512371 Email: emarsh@rolesvillenc.gov

Applicant Owner P.O.A. Agent Legal Representative
Check all that apply.
1). Name: Eric Marsh Signature: 
(type or print clearly)
Mailing Address: 502 Southtown Circle City/State/Zip: Rolesville
Phone: 9842512371 Email: emarsh@rolesvillenc.gov
2). Name: _____ Signature: _____
(type or print clearly) (spouse if applicable)
Mailing Address: _____ City/State/Zip: _____
Phone: _____ Email: _____

By signing the above, I swear and affirm that I am the owner(s) or authorized representative as shown in the records of Wake County, North Carolina, which is the subject of this application. I further affirm that I am fully aware of the Town's application, fees, and procedural requirements, and I consent to this Application. I authorize the person(s) listed below to submit this Application and serve as the representative and point of contact for this Application.