



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: 4801 Burlington Mills Road (WakeMed)
Site Address: 4801 Burlington Mills Road
Parcel ID: 1758498280 Deed Reference: Book 20241, Page 1501

Financially Responsible Party *This field is required.
Name: Thomas Cavender Signature: Thomas Cavender
Company Name: WakeMed Title: Vice President, Facilities & Construction
Mailing Address: 3000 New Bern Ave. City/State/Zip: Raleigh, NC 27610-1231
Phone: Email: tcavender@wakemed.org

Applicant [x] Owner [] P.O.A. [] Agent [] Legal Representative []
Check all that apply.
1). Name: Wakemed Property Services Signature: Thomas Cavender
Mailing Address: 3000 New Bern Ave. City/State/Zip: Raleigh, NC 27610-1231
Phone: Email: tcavender@wakemed.org
2). Name: Signature:
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.