

City of Stamford , CT
PROPERTY OWNER AUTHORIZATION
for Temporary Outdoor Dining Permit

I / We, _____, (please print -

list all property owners), owners of the below referenced property,

hereby authorize _____, (print name of

representative) representative for _____,

(Restaurant Owner's Name, Restaurant Name) to make an application for a

Temporary Outdoor Dining Permit for the following property:

Restaurant Street Address: _____

in Stamford CT, _____ (ZIP Code)

Property Owner's or Owners' Signature(s)_____

Date: ____/____/2020

Address: _____

Phone: (____)____-_____

E-Mail: _____