



City of Elkhart  
Building Department

Phone: 574-294-5471 ext 107  
Fax: 574-389-1781

The following individuals have my authorization to submit permit applications, bearing my signature, to the City of Elkhart City.

(please print)

Licensee \_\_\_\_\_

Company \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

I understand that all applications must bear my signature.

Please note

**\*\* This form must be submitted in person by the Licensee or be notarized\*\***

Licensee (signature) \_\_\_\_\_ Date \_\_\_\_\_

Accepted by \_\_\_\_\_ Date \_\_\_\_\_