

Community Development Department

**1600 First St., P.O. Box 660
Napa, CA 94559-0660**

Engineering Division
Phone: (707) 257-9530

Planning Division
Phone: (707) 257-9530

Building Division
Phone: (707) 257-9540
Inspections: (707) 257-1063



Facsimile: (707) 257-9522

**Napa Fire Department
Fire Prevention Division**
Phone: (707) 257-9590



AUTHORIZATION TO ACT AS AGENT

Date: _____

City of Napa
Building Division
P. O. Box 660
Napa, CA 94559

To Whom It May Concern:

I am the owner of the property at _____
(Street address).

The following work will be performed at that address: _____
(Description of project).

I authorize _____ *(fill in name)* to act as my agent to obtain necessary permits for the work described above.

Furthermore, I agree to defend, indemnify, and hold the City of Napa, its elected officials, officers, directors, employees, agents, and volunteers harmless from and against any and all loss, liability, or damages, including reasonable attorneys' fees and/or court costs, arising out of the performance of this contract, except for the sole negligence of the City of Napa, its elected officials, officers, directors, employees, agents, and volunteers.

(Property Owner Signature)

(Property Owner Printed Name)