



Revised 2.26.18

## DESIGN REVIEW PROCESS APPLICATION

**Planning & Development Services**  
455 Mountain Village Blvd. Suite A  
Mountain Village, CO 81435  
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970-728-4342  
[cd@mtnvillage.org](mailto:cd@mtnvillage.org)

### OWNER AGENT AUTHORIZATION FORM

I have reviewed the application and hereby authorize \_\_\_\_\_ of  
\_\_\_\_\_ to be and to act as my designated representative and represent the development  
application through all aspects of the development review process with the Town of Mountain Village.

\_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_  
(Printed name)