



**DEPARTMENT OF PUBLIC WORKS**

One Detjen Drive | Crestwood, MO 63126 | 314-729-4720

**Property Owner Authorization**

Application Date: \_\_\_\_\_

**PROPOSED BUSINESS/ACTIVITY ADDRESS:** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_

**NAME OF BUSINESS/ACTIVITY at proposed location:** \_\_\_\_\_

Business Contact Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Email: \_\_\_\_\_

**PROPERTY OWNER'S NAME:** \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

Property Owner's Phone: \_\_\_\_\_ Property Owner's Email: \_\_\_\_\_

Prop Owner or Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_