City of Hollister Community Development Department Building Division

339 Fifth Street, Hollister, CA. 95023
Contact us: permitcenter@hollister.ca.gov (831) 636 -4355
Website: hollister.ca.gov

AUTHORIZATION TO ACT AS AGENT

Date: _____

Permit No.: _____

To whom it may concern

I am the owner of the property / contractor at:

_____

_____

(Street address)

The following work will be performed at that address:

_____

_____

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 Hollister, 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 Hollister, its elected officials, officers, directors, employees, agent, and volunteers.

Property Owner / Contractor Signature: _____

Property Owner / Contractor Printed Name: _____