



# TOWN OF WAREHAM

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Department of Inspectional Services • 54 Marion Road Wareham, MA 02571 • Tel: 508-291-3100 Ext 3190

## Property Owner Affidavit

I, \_\_\_\_\_, as Owner of the subject property  
Property Owner (print)

at \_\_\_\_\_  
Property Location

hereby authorize \_\_\_\_\_  
Agent/Builder/ Contractor

to act on my behalf, in all matters relative to this building permit application.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date