Community Development Department
Planning Division
350 Main Street
El Segundo, CA 90245
(310) 524-2350
Planning@elsegundo.org

NOTES: **1. Complete the owner and applicant/representative affidavits and owner authorization below.**
2. Separate Affidavits must be submitted if there are multiple owners.

OWNER'S AFFIDAVIT & AUTHORIZATION

I/We, _____ being duly sworn depose and say that I/we am/are the **OWNER** of the property involved in this application and that I/we have familiarized myself (ourselves) with the rules and regulations of the City of El Segundo with respect to preparing and filing this application and that the foregoing statements herein contained and the information documents and all plans attached hereto are in all respects true and correct to the best of my/our knowledge and belief.

I/We hereby authorize _____ to act for me/us in all matters relevant to this application. I understand that this person will be the exclusive contact on the project and will be sent all information and correspondence.

Signature: _____ Date: _____

APPLICANT/REPRESENTATIVE AFFIDAVIT

I/We, _____ being duly sworn depose and say that I/we am/are the **APPLICANT/REPRESENTATIVE** of the property involved in this application and that I/we have familiarized myself/ourselves with the rules and regulation of the City of El Segundo with respect to preparing and filing this application and that the foregoing statements herein contained and the information documents and all plans attached hereto are in all respects true and correct to the best of my/our knowledge and belief.

Signature: _____ Date: _____