



HALL COUNTY PLANNING DEPARTMENT

**P. O. Box 1435
Gainesville, GA 30503
Phone: 770-531-6809
Fax: 770-531-3902**

AUTHORIZATION OF PROPERTY OWNERS

Name of owner(s) _____

Address _____

Phone Number _____

Name of Local Contact Person _____

Address _____

Phone Number _____

I swear that I am the owner of the subject property as shown in the records of Hall County, Georgia, on which short term rental use is desired.

I authorize the person named above to act as the local contact person and applicant in the pursuit of short term rental use of this property.

Signature of Owner(s)

Personally appeared before me

who swears that the information contained in this authorization is true and correct to the best of his/her knowledge and belief.

Notary Public

Date