

Town of McConnells
P O Box 115
McConnells, South Carolina 29726-0115

Consent Form

Date: _____

License and/or Property Holder: _____

E-Mail: _____

License Type: _____ License Number: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell: _____

I give the following my consent to pull permits on my behalf

Name: _____ Position: _____

Email: _____

Phone: _____ Cell: _____

_____ Date: _____

License Holder/Property Holder Signature

On this ____ day of _____, 20____, _____, personally
Appeared before me _____, who stated that the
instrument was signed in behalf of the said company/corporation by authority of its board and directors and
acknowledged said instrument to be of its voluntary act and deed.

Before Me:

Notary Public for South Carolina

My Commission Expires: _____