

DNREC – Div of Water Resources  
Ground Water Discharges Section  
89 Kings Highway  
Dover, DE 19901  
PHONE: 302-739-9947  
FAX: 302-739-7764



DNREC – Div of Water Resources  
Ground Water Discharges Section  
20653 DuPont Blvd. Unit 5  
Georgetown, DE 19947  
PHONE: 302-856-4561  
FAX: 302-856-5088

## DESIGNATION OF AUTHORIZED AGENT

The purpose of this form is to allow the owner(s) of a parcel to authorize an agent to act for them in filing an application with the Ground Water Discharges Section. When properly completed and notarized, this form allows the agent to sign his or her name on the permit application in place of the owner(s) signature. An Authorized Agent form does not require notarization if agent is not signing the application for the owner(s). The agent will act as the contact person during the processing procedure and all correspondence will be directed to such person except as indicated below.

The section below must be completed in full, signed and dated. An original of this form must be submitted to the Department with the application.

I, \_\_\_\_\_, hereby authorize the person named below to act for me as my agent in filing an application for the project listed below with the Ground Water Discharges Section:

Project Location: \_\_\_\_\_  
Tax Parcel #: \_\_\_\_\_  
Agent: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

\_\_\_\_\_  
*Property Owner's Signature*

\_\_\_\_\_  
*Date*

STATE OF \_\_\_\_\_:

SS

COUNTY OF \_\_\_\_\_:

Comes now the subscriber, a notary public in and for the state and county aforesaid, owner(s) name, \_\_\_\_\_, known by me to be such, who being by me duly sworn, did depose and say that the preceding instructions constitute their wishes concerning the designation of a legally authorized agent for purposes of submitting application(s) for a permit to construct and/or use a septic on property owned by them, and authorizes the agent to sign all application form(s) for them.

SWORN TO AND SUBSCRIBED before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
*Notary Public Signature*

\_\_\_\_\_  
*Date Commission Expires*