

**City of Oberlin, Planning Dept.
69 South Main Street
Oberlin, Ohio 44074
FY2007**

AUTHORIZATION BY APPLICANT

I hereby authorize the City of Oberlin, Planning Dept. to obtain verification of employment and financial information, if necessary.

DATE

SIGNATURE

Please Print:

Name: _____

S.S. #: _____

If applicable:

Name of Employer _____

Address _____

City, State Zip Code _____

Other income received from; i.e., pension, PERS, Child support, Interest income Rental income, etc.:

