

## Applicant Authorization (Mural)

Development Services Department – Planning & Zoning Division

City of Panama City, City Hall, 501 Harrison Avenue, 2<sup>nd</sup> Floor, Room 217, Panama City, FL 32401

Phone: 850-872-3025 | Email: [planning@panamacity.gov](mailto:planning@panamacity.gov) | Website: [www.panamacity.gov](http://www.panamacity.gov)

I hereby certify that the information contained in this application is complete and accurately represents the proposed mural. I am familiar with Section 112-17 of the City's Land Development Regulation and agree to abide by these requirements as they relate to murals and their upkeep. I understand that the Mural Review Committee may take up to 30 days to complete its review. In addition, I understand that I have a period of six (6) months from the date of issuance of the development order to initiate the project.

### Authorization of Agent or Representative

Applicant/Authorized Agent Name (Print): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ Sworn to and  
subscribed me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
By \_\_\_\_\_, the applicant is personally known to  
me or has produced \_\_\_\_\_ as identification. Notary Public:  
\_\_\_\_\_

My Commission Expires: \_\_\_\_\_

NOTARY STAMP:

