Community Development Department
2074 Aurelius Rd, Holt MI 48842
P: 517-694-8281 • FAX: 517-694-1289
delhitownshipmi.gov

**SESC**
LETTER OF AUTHORIZATION

DATE STAMP

# LETTER OF DESIGNATION

## To Secure a Soil Erosion & Sedimentation Control Permit

Date: _____

I, the landowner, of property, parcel number _____,

address _____,

designate _____ to secure a Soil Erosion and
*(Print designated agent's name)*

Sedimentation Permit for the earth disturbance on my property.

| | | | |
|---|---|---|---|
| **Landowner's Name:** | | | |
| Company Name: | | | |
| Address: | City: | State: | Zip: |
| Ph: | Email: | Fax: | |

| | | |
|---|---|---|
| ***Landowner's Signature*** | ***Print Name*** | ***Date*** |

| | | | |
|---|---|---|---|
| **Designated Agent's Name:** | | | |
| Company Name: | | | |
| Address: | City: | State: | Zip: |
| Ph: | Email: | Fax: | |

| | | |
|---|---|---|
| ***Designated Agent's Signature*** | ***Print Name*** | ***Date*** |