

**NEW JERSEY DEPARTMENT OF TRANSPORTATION  
ACCESS PERMIT APPLICATION  
POWER OF ATTORNEY DECLARATION**

ROUTE NO. \_\_\_\_\_ MILE POST: \_\_\_\_\_ DIRECTION: \_\_\_\_\_

I, \_\_\_\_\_  
(GRANTOR)

OF THE \_\_\_\_\_ OF \_\_\_\_\_  
(CITY/BORO/TOWNSHIP) (MUNICIPALITY)

AND STATE OF \_\_\_\_\_ HEREBY APPOINT  
(NAME OF STATE)

\_\_\_\_\_  
(GRANTEE)

\_\_\_\_\_  
(ADDRESS)

\_\_\_\_\_  
PHONE NO. ( )

AS MY TRUE AND SUFFICIENT AND LAWFUL ATTORNEY FOR ME AND IN MY NAME TO FILE WITH  
THE STATE OF NEW JERSEY ALL PERMIT APPLICATIONS

PERTAINING TO LOT NO. \_\_\_\_\_ BLOCK NO. \_\_\_\_\_

IN \_\_\_\_\_ IN THE COUNTY OF \_\_\_\_\_  
(MUNICIPALITY) (COUNTY)

TO ACT IN ALL MATTERS RELATED TO SAID APPLICATIONS AND TO MAKE BINDING  
COMMITMENTS WITH REGARD TO ANY FAIR SHARE CONTRIBUTIONS OR OTHER OBLIGATIONS  
THAT I MAY OWE THE STATE AS THE RESULT OF SAID APPLICATIONS.

\_\_\_\_\_  
(SIGNATURE OF GRANTOR)

SIGNED AND SEALED \_\_\_\_\_ DAY OF \_\_\_\_\_ 200 \_\_\_\_\_

\_\_\_\_\_  
(NOTARY PUBLIC)

<b>DEPARTMENT USE ONLY</b>
APPLICATION NUMBER: _____