CONSENT TO ACCESS PROPERTY

All fields must be completed. Please complete a separate form for each structure

I verify that I/we,		, am/are the legal owner(s) of the real	
property located at: Street Address			
City/Town/Area	Zip	_ in Fayette County, West Vi	rginia, and which
is further described by the Fayette Cou	unty, Assessor as Parcel No.:	Tax Map No.:	of the
(Circle One) New Haven Plateau	<u>Valley</u> Taxing District. Th	e structure in question is	story/stories
&(color). Other defining feat	tures		
Property Owner Phone Number:		_Alt Phone:	
Property Owner email:			
			tecountywv.gov
Residence Address:			
Mailing Address:			
(Fayette County) and/or the agents and employ property to inspect the structure(s) on the prostructure. I understand that the bids obtained the County and/or the LRA to cover the cost of derethat by allowing inspection of my/our property of the structure(s) on my/our property. I also ut to allow Fayette County or the LRA to demoliobtained and available to demolish and disped documents authorizing the demolition and disped documents authorizing the demolition and disped the property. Should Fayette County or the LRA from growthe LRA for the disposal of materials or for I further agree to hold Fayette Count from the inspection of the structure(s) on the agents of the structure(s) on the agree to hold Fayette Count from the inspection of the structure(s) on the agents of the structure(s) on the structure(s)	rough the inspection of my/our promolition and disposal of the structure y that there is no guarantee that funderstand by authorizing the inspecies the structure(s) on my/our propose of the structure(s) on my/our posal of the structure(s). The remy/our ownership and neither For RA demolish the structure(s) on my e funds expended during the demonstration of the structure(s) should be the contents of the structure(s) should be the contents of the structure(s) should be the LRA, the employees and a	g a bid as to the cost of demolition perty will be used to apply for gran re(s) on my/our property. I understanding will be available for the demoction of my/our property that I amerty at a later date. I understand the property that I/we will be require ayette County nor the LRA will act y/our property through grant fundilition and disposal process and that I will receive no compensation to could the same be demolished.	and disposal of the t funding by Fayette and and acknowledge polition and disposal under no obligation at if grant funding is d to sign additional quire any interest in ting that I/we will be t such expenses will from Fayette County
Property Owner		Witness	
Property Owner			
Property Owner			