



Town of Corinth Planning Department  
 600 Palmer Avenue  
 Corinth, New York 12822  
 Ph #- (518) 654-9232 ext. 6  
 Fax #- (518) 654-7751

**Representation Certification Form – Boundary Line Adjustment**

State of New York:

County of Saratoga:

I, \_\_\_\_\_, being duly sworn, depose as follows:

- That I am the owner of a parcel of land located in the Town of Corinth, County of Saratoga, State of New York and identified as Tax Parcel \_\_\_\_\_ on the Town of Corinth Tax Map.
- I have applied to the Town of Corinth Planning Board for Boundary Line Adjustment approval.
- I hereby authorize \_\_\_\_\_ to act as my duly appointed representative before the Town of Corinth Planning Board for the purpose of subdividing the aforementioned parcel of land.
- Such power to act on my behalf shall include: (Specify limits of authority)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**\*\*\* This must be signed in front of a Notary Public\*\*\***

\_\_\_\_\_  
 Owner/Applicant

State of \_\_\_\_\_  
 County of \_\_\_\_\_

On this, \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me, the subscriber personally appeared and is to me personally know (or satisfactorily proven) and known to me to be the same person(s) described in and who executed the within Instrument, and he/she duly acknowledged to me that he/she executed the same.

**Notary Stamp:**

\_\_\_\_\_  
 Notary Public

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