

This form is for informational purposes only. If you have any interest in completing this agreement please contact the Crown Castle Landowners Help Desk to direct you to the appropriate party to assist you with this matter. Please call 866.482.8890 or email at [landownershelpdesk@crowncastle.com](mailto:landownershelpdesk@crowncastle.com).

### LIMITED POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS that I [*insert land owner name*], do hereby make, constitute and appoint [*insert Crown entity holding lease/sublease interest*] my true and lawful attorney, granting unto said attorney the limited power and authority to do and perform all and every act and thing whatsoever that is requisite, necessary or appropriate to prepare, sign, submit, file and present on my behalf building, permitting, zoning and/or land use applications with the appropriate local, state and/or federal agencies necessary to obtain land use changes, special exceptions, zoning variances, zoning permits, conditional use permits, special use permits, administrative permits, construction permits, operation permits, building permits, and other approvals or permits, and to accept and receive any and all sums of money or other consideration which shall be coming to me on account of refunds, bond refunds or overpayment, and to do, execute and permit other necessary acts as I might do acting personally related to the following real property:

*[insert legal description, tax map number, address, etc.]*

This power of attorney shall not terminate in the event of my disability.

I hereby ratify all that my attorney shall lawfully do or cause to be done under the authority of this power of attorney.

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Date

ACKNOWLEDGMENT

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

On \_\_\_\_\_ before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the  
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that  
he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on  
the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the  
instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)