Written Consent Form

Date:	
TO: CITY OF MORENO VALL	EY
l,	Property Owner's Name) , authorize
(PRINT:	Property Owner's Name)
(PR	INT: Tenant's Name) to operate
the business	
(PRII	NT: Name of Business)
at	, Moreno Valley, California.
(PRI	NT: Property Address)
FROM:	
(PROPERTY OWNER'S SIGNATURE) *	
	ization for Apartment Complexes or Management Companies will require a
Business Card with contact information for verification.	
	Diagon ettech Dusiness Conditions
	Please attach Business Card here