LOCAL AGENT NOTARIZED DECLARATION

I,, truly declare and af	firm that as of the effective date
below, I am the LOCAL AGENT (not to be confused with Registe	red Agent) for the property
here within. I acknowledge that I understand LOCAL AGENT TO	
in the city limits of Jackson, Mississippi who is able to respond reason	ably to contact made by the
Director of Planning or designee on a 24-hour basis. The local agent m	nust be able to legally represent
the owner as a requirement for rental housing under Chapter 26, Arti	
the City of Jackson, Mississippi. (Note: a registered agent could be	a local agent if they meet the
definition of a local agent.)	
Effective Date:	
Property Address:	
Owner Name:	
Owner Phone Number:	
LOCAL AGENT INFORMATION	
Address:	
Email Address	
Primary Phone Number:	•
Secondary Phone Number:	-
•	_
I swear or affirm that the above information is true and correct_	
	Signature of Local Agent
perso	onally appeared before me.
Sworn to and subscribed before me thisday of	, 20
State of Mississippi	
County of	
Notary Public	
My Commission expires	

THIS DECLARATION MUST BE SUBMITTED WITH YOUR RENTAL REGISTRATION APPLICATION AT https://jacksonms.viewpointcloud.com/categories/1089 or delivered to Rental Registration Division, PO Box 17, 200 S. President St., Jackson, MS 39205-0017