

Dinwiddie County Planning & Zoning Department  
SPECIAL LIMITED POWER OF ATTORNEY APPLICATION



Planning Department  
Post Office Drawer 70  
Dinwiddie, Virginia 23841  
Phone (804) 469-4500 ext. 2117 Fax (804) 469-5322

Know all men by these presents: That I (We)

(Name): Aubrey S. Clay, Jr. (Telephone): 804-898-2058

(Address): 25110 Courthouse Rd., Stony Creek, VA 23882

the owner(s) of all those tracts or parcels of land ("Property") conveyed to me (us), by deed recorded in the Clerk's Office of the Circuit Court of the County of Dinwiddie, Virginia, by

Instrument No. Plat Book 9, on Page 55, and is described as Tax Map Parcel #. 43-9 do hereby make, constitute and appoint

(Name): Mike Wallgren (Telephone): 651-261-7617

(Address): 132 N. York Street, Suite 3L, Elmhurst, IL 60126

To act as my true and lawful attorney-in-fact and in my (our) name, place and stead with full power and authority I (we) would have if acting personally to file planning applications for my (our) above described Property, to include (put a checkmark next to the appropriate action that applies(y):

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Rezoning Request (including proffers) | <input type="checkbox"/> Building Permit(s)       |   |
| <input checked="" type="checkbox"/> Conditional Use Permit                | <input type="checkbox"/> Subdivision Exception    |   |
| <input type="checkbox"/> Preliminary Subdivision Plat                     | <input type="checkbox"/> Site Plan of Development | <input type="checkbox"/> Landscape Plan       |
| <input type="checkbox"/> Final Subdivision Plat                           | <input type="checkbox"/> Site Plan Modification   | <input type="checkbox"/> Lighting Plan        |
| <input type="checkbox"/> Subdivision Construction Plans                   | <input type="checkbox"/> Variance Request         | <input type="checkbox"/> Transfer of Approval |

My attorney-in-fact shall have the authority to offer proffered conditions and to make amendments to previously approved proffered conditions except as follows:

This authorization shall expire one year from the day it is signed, or unto it is otherwise rescinded or modified in witness thereof, I (we) have hereto set my (our) hand and seal this 23 day of April, 2021.

Signature(s) A. S. Clay, Jr.

State of Virginia, City/County of Petersburg, To-wit:

I, Dena E. Patrick, a Notary Public in and for the jurisdiction aforesaid, certify that the person(s) who signed to the foregoing instrument and who is (are) known to me, personally appeared before me and has acknowledged the same before me in the jurisdiction aforesaid this 23 day of April, 2021.

My commission expires: 9/21/22

Dena E. Patrick  
Notary Public

