

Authorized Agent Authorization Form Dated: May 2015

A. Project information				
Street Address:		Unit	No.	Lot/Con:
B. Party to be authorized				
Last Name:	First Name:	Corporation or Pa	rtnership:	
Street Address:		Unit	No.	Lot/Con:
Municipality:	Postal Co	ode: Prov	rince:	
Telephone Number:	Cell Number:	Ema	ıil:	
C. Declaration of Owner				
	, being the Registe e application for permit on my beha e Ontario Building Code for the pu	alf to Building Services of the	ne Town of	eby authorize the party stated in Pelham in accordance with the
Date:	Signature	> :		
The Ontario Building Code state owner, a lessee or mortgagee in	s that "owner includes, in respect of th possession".	e property on which the const	ruction or de	emolition will take place, the registered

Personal information contained in this form is collected under the authority of subsection 8(1.1) of the Building Code Act, 1992, and will be used in the administration and enforcement of the Building Code Act, 1992. Questions about the collection of personal information may be addressed to the Chief Building Official of the Town of Pelham.