

## **Appointment of Agent Form**

Where the applicant is someone other than the owner and/or where the subject parcel is owned by more than one person, an Appointment of Agent form **must** be provided in order to submit an application to the City of Parksville.

By signing this form, the Owner is certifying that the Agent is authorized to endorse, on the Owner's behalf, all applications, documents and/or permits (other than those to be registered at the Land Title Office) for the application type(s) indicated  $\square$  below, and authorized to represent the Owner in all discussions with City of Parksville staff.

APPLICATION TYPE			
Building Permit: Develo	opment Permit:	Development Variance Permit:	Subdivision:
Rezoning / OCP: Liquor	Licence:	Tree Removal Permit:	Sign Permit:
SUBJECT PROPERTY			
C: : A.I.I			
Legal Address:			
This is to certify that I / We, the Owner(s):			
OWNER INFORMATION			
Name(s):			
Company:			
Address:			
City:	Postal Code:		
Email:	Telephone:		
Hereby appoint:			
AGENT INFORMATION			
Name(s):			
Company:			
Address:			
City:	Postal Code:		
Email:	Telephone:		
To	act as Agent fo	or the subject property	,
To act as Agent for the subject property.			
Owner - Name (please print):	Additional Owne	r – Name: Additional	Owner – Name:
Cianaturo	Signatura	Signature	
Signature:	Signature:	Signature:	
Date:	Date:	Date:	

Personal information is collected under authority of the Land Title Act, Local Government Act, Strata Property Act and Freedom of Information and Protection of Privacy Act and will only be used for the purpose of processing the permit application and ancillary documentation. For further information, please contact the City's Freedom of Information Coordinator at 250 954-3070.