Owner's Authorization Form

Date*	:			
I,		of		authorize
	PRINT – Owner's Name *		Company (if applicable)	
		of		to make
	PRINT - Name *		Company (if applicable)	
	ation, discuss and handle all mattering (only select those that apply) *	•	my behalf, in relation to the a	application for the

- Building/Demolition Permit
- Business License
- Development Permit
- Minor Variance
- D Portable or Permanent Sign
- □ Subdivision/Consolidation
- Zoning & Building Compliance Letter
- D Zoning Bylaw Amendment
- Zoning Memorandum
- Other (please specify): ______

For the following civic address*:

Legal Description (if known):

Owner's Signature *

wner's	Email	(if	applicable):	
	wner's	wner's Email	wner's Email (if	wner's Email (if applicable):

Owner's Phone Number *: _____

Owner's Mailing Address *:

Street Address or Box #

City and Province

Postal Code



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