

**Development Services Department
Building Permit & Inspection Services**

*Property Address: _____

*Proposed Work: _____

Permit Application No.: _____

This document shall serve to notify the City of Oshawa that I am/we are the legal owner(s) of the property described above (the "Subject Property"), and I/we hereby authorize the person indicated below ("Authorized Agent"),

***Authorized Agent's Name**_____
***Authorized Agent's Address**

to act on my/our behalf on all matters pertaining to the Proposed Work on the Subject Property, including but not limited to applying for any necessary permits, attending arranged inspections, and/or endorsing application documents on my/our behalf. I acknowledge and understand that although I have an Authorized Agent, I/we are still responsible for all terms and conditions contained in the permit(s). By signing below, I have read this entire document and give effect to the authorization of my/our Authorized Agent.

(If owner is an Individual):

*Last Name: _____ *First name: _____

*Street address: _____ *Unit number: _____

*Municipality: _____ *Province: _____ *Postal code: _____

*Telephone number: _____ Cell number: _____

Email: _____

*Owner's Signature: _____ *Date: _____

(If owner is a Corporation):

*Corporation or Partnership: _____

*Street address: _____ *Unit number: _____

*Municipality: _____ *Province: _____ *Postal code: _____

*Telephone number: _____ Cell number: _____

Email: _____

***Name of Authorizing Officer**_____
***Signature of Authorizing Officer**_____
***Date**

(I have authority to bind the Corporation)

Note: All fields marked with a * are mandatory, and this form will be considered incomplete and not in effect if the mandatory fields above are not completed in full.