

**LETTER OF AUTHORIZATION
DEVELOPMENT APPLICATIONS**

FOR OFFICE USE ONLY:
File No. _____

This form must be completed and submitted to the City of Abbotsford if the Registered Property Owner(s) (per Title Search) is/(are) not the Applicant OR if there are more than one Registered Property Owner and not all of the Registered Property Owners are signing as Applicants for a Development Application. Those Registered Property Owners who are not signing as Applicants must provide their written approval for (all of) the Applicant(s) acting on their behalf by signing this Letter of Authorization. If additional space required (more property owners, more properties, more companies or more individual owners than the space provides, you must attach additional completed places with the necessary signatures).

I/We, (list all of the Registered Property Owner(s) on Title - attach additional completed sheets if necessary) _____

_____ (the "Owner"),

own the lands described within this application form listed under Section 4 and confirm the appointment of:

(Applicant Company Name (if Applicable)) (All Contact Names Permitted to Work On This Application (Required))

with the following contact information: _____

(Applicant's Mailing address (Required))

() - _____ as agent (the "Applicant")

(Applicant's Phone Number (Required))

(Applicant's Email Address (Required))

with respect to this Development Application (the "Application") regarding the lands described in Section 4.

It is understood, that:

1. the City of Abbotsford shall deal exclusively with the above-noted applicant with respect to all matters pertaining to the Application and is under no obligation to communicate with the Owner or any other person;
2. the above-noted applicant has authority to make all necessary arrangements with the City of Abbotsford, to perform all matters and to take all necessary proceedings with respect the Application;
3. a written letter from the Owner is required to cancel this appointment and an Administrative Change Fee will be required; and
4. If the owner is a corporation or society, the signature located below is an authorized signatory of the corporation/society.

By signing this authorization/application, I hereby agree that all information, including personal information, contained on this document including all attachments will be made available to the public.

If **Incorporated Company or Registered Society** is a Registered Owner, then complete the signature block below. If more than one Company/Society, attach additional completed pages with those signatures, as required.

Signature of Witness

Print Name of Witness: _____

Phone: _____

**Name of Corporation/Society
By its Authorized Signatory(ies)**

Signature of Authorized Signatory

Print Name: _____

Date: _____

If Registered Owners are **individual persons**, then complete the signature block below. If more than two individual owners, attach additional *completed* versions of this page signed by those owners, as required.

ALL INDIVIDUAL PERSONS WHO ARE A REGISTERED PROPERTY OWNER AND ARE NOT AN APPLICANT MUST SIGN THIS AUTHORIZATION:

Signature of Witness

Print Name of Witness: _____

Phone: _____

Signature of Owner

Print Name: _____

Date: _____

Signature of Owner (if applicable)

Print Name: _____

Date: _____

