



Planning and Development Department
4949 Canada Way, Burnaby, BC V5G 1M2
Phone: 604-294-7400 E: planning@burnaby.ca

AGENT AUTHORIZATION FORM FOR PLANNING DIVISION

Section 1: Property Information

SITE ADDRESS (ES): _____

PID(S): _____

**Note: All properties listed must be owned by the same registered owner(s)*

This Authorization Form shall serve to notify the City of Burnaby ("City") that I am / we are the legal owner(s), as applicable, of the said land described above ("Property") and do authorize the person indicated below ("Agent") to act on the Owner's behalf on all matters pertaining to the below indicated application type(s) ("Application") for the Property. The Owner acknowledges that it has read and understood this Authorization Form and the application requirements for the Application and hereby authorizes the Agent to act on the Owner's behalf.

This document shall not be read as authorizing the Agent to undertake work on the property. Control of activities on the property remains with the property owner. The Agent must obtain written permission from the property owner independently to begin and continue any demolition or construction. ALL building/demolition permits are issued in the owner's name and only the owner.

It is understood that, until the City is advised, in writing, that the Agent no longer acts on the Owner's behalf in respect of the Property, the City shall deal exclusively with the Agent regarding the Application. The Owner acknowledges that the City is under no obligation to communicate with the Owner or any other person other than the Agent, with regard to the Application. This authorization supersedes all previous appointments.

All registered owners of the Property shall sign this Authorization Form. If the Property is company-owned the Owner must be represented by an Agent. Use additional sheets if necessary. Any changes in the ownership or leasehold status of the Property will require the submission of new Authorization Forms.

Section 2: Application Information

Please choose the applicable application type below (check all that apply):

If the property is Strata Titled, the Strata Council represents the Owner and Strata Council meeting minutes are required to show owners of the strata lots on the property have supported the Application.

- | | | |
|---|--|---|
| <input type="checkbox"/> Property Address Change | <input type="checkbox"/> Temporary Use Permit | <input type="checkbox"/> Strata Titling |
| <input type="checkbox"/> Access and Copy of Record(s) | <input type="checkbox"/> Comprehensive Sign Plan(s) | <input type="checkbox"/> Liquor and/or Cannabis Application |
| <input type="checkbox"/> Heritage Application(s) | <input type="checkbox"/> Rezoning / Subdivision / Preliminary Plan Approval / Development Variance | |

Section 3: Registered Owner(s) Information (all listed Land Title Owners must complete)

Owner / Company & Representative Name		
ADDRESS:	CITY:	POSTAL CODE:
PHONE NUMBER:	CELL PHONE:	
E-MAIL:	OWNER TO BE NOTIFIED AT MILESTONES: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SIGNATURE:	DATE:	

Owner / Company & Representative Name		
ADDRESS:	CITY:	POSTAL CODE:
PHONE NUMBER:	CELL PHONE:	
E-MAIL:	OWNER TO BE NOTIFIED AT MILESTONES: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SIGNATURE:	DATE:	

Owner / Company & Representative Name		
ADDRESS:	CITY:	POSTAL CODE:
PHONE NUMBER:	CELL PHONE:	
E-MAIL:	OWNER TO BE NOTIFIED AT MILESTONES: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SIGNATURE:	DATE:	

Owner / Company & Representative Name		
ADDRESS:	CITY:	POSTAL CODE:
PHONE NUMBER:	CELL PHONE:	
E-MAIL:	OWNER TO BE NOTIFIED AT MILESTONES: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SIGNATURE:	DATE:	

I hereby declare that the Provincial licence and/or certification is in effect and valid and that all other information contained in this application is accurate. I acknowledge that the City is relying on this declaration for issuance of permit. I further confirm that all work performed under this permit shall be done in accordance with all applicable City of Burnaby Bylaws and Provincial Regulations.

Personal information collected on this form is in accordance with s. 26(c) of the Freedom of Information and Protection of Privacy Act (RSBC 1996) for permitting purposes. Please be advised that permits are considered public records that are available in various City publications or disclosed through information requests. For questions regarding the collection, use and disclosure of personal information please contact the FOI Administrator at FOI@burnaby.ca or by calling 604-294-7944 or in person at City Hall at 4949 Canada Way, Burnaby.

Section 4: Authorized Agent Information

AGENT NAME: (Print):	
COMPANY NAME: (If applicable)	
ADDRESS:	
PHONE NUMBER:	CELL PHONE:
E-MAIL:	

Signature

Date
(YY/MMM/DD)

AGENT SIGNATURE:
