

Planning and Development Department 4949 Canada Way, Burnaby, BC V5G 1M2 Phone: 604-294-7130 Fax: 604-294-7986

This will confirm my appointment of:

Office	

Building Permit Number:

(Agent's Name and/or Name of Company)

AGENT AUTHORIZATION - BUILDING DEPARTMENT

Building and Demolition Permits

OWNER/LESSEE

as my agent in all matters related to obtaining any required building permits or demolition permits for:

Project Address:			
and to make all necessary arrang respect thereto.	ements with the City of Burnaby, to perform all	matters and to take all necessary proceedings with	
matters pertaining to the propose	-	ity will deal exclusively with my agent with respect to all and are under no obligation to communicate with me or zation supersedes all previous appointments.	
		the property. Control of activities on the property remains perty owner independently to begin and continue any	
demolition or construction.			
I /We hereby certify that I am/we	are the () registered owner(s), or () the lessee	of the said land and do hereby consent to the above.	
	Owner/Lessee information must match the Schedule	e "F" Owner(s) Undertaking	
1) Owner or Lessee Name:		Signature:	
2) Owner or Lessee Name:		Signature:	
3) Owner or Lessee Name:		Signature:	
Company Name (ifapplicable):		Date:	
	AGENT INFORMATION	N	
Acknowledged by Agent:			
	(Print Agent Name and/or Name of Company)		
E-mail:	Phone:	Cell:	
Address:	City:	Postal Code:	
A	gent Signature	 Date	

All building permits are issued in the owner(s) name(s). Only the owner can request a transfer, refund or cancel a permit.