



# Owner's Authorization

Corporate Services  
Municipal Law Enforcement and Licensing Services

Property Address: \_\_\_\_\_

This document shall serve to notify the City of Oshawa that I am/we are the legal owner(s) of the property described above and do authorize the person indicted below ("Authorized Agent") to act on my/our behalf on all matters pertaining to the selected applications (including attending arranged inspections) indicated below for the property described above, including the authority to endorse on my/our behalf application documents.

### Type of Applications/Licenses

- Group Home
- Two-Unit House
- Other (Specify) \_\_\_\_\_
- Lodging House
- Pool Enclosure

Name of Property Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Authorized Agent: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

Personal information contained on this form is collected under the authority of Section 11 of the Municipal Act, 2001 and will be used for administering the Municipal Law Enforcement and Licensing process. Questions concerning collection of personal information should be directed to the City of Oshawa's Information Access and Privacy Officer at 50 Centre Street South, Oshawa, Ontario, L1H 3Z7 or 905-436-3311.