

# Owner's Authorization Form

Resort Municipality of Whistler - Engineering Department

## LETTER OF AUTHORIZATION

*This form must be completed and submitted to the Resort Municipality of Whistler 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 an Engineering Permit 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 is required, see the attachment to the application. If there are more properties than the space provided, you must attach additional completed places with all the necessary information.*

I/We, (list all of the Registered Property Owner(s) on Title) \_\_\_\_\_

\_\_\_\_\_ (the "Owner"), own the lands described as

(Civic Address(es))

(PID(s))

(Legal Description(s))

and confirm the appointment of: \_\_\_\_\_  
(Applicant Name(s))

(Applicant's Mailing Address)

( ) - \_\_\_\_\_ as the agent (the "Applicant")

(Applicant's Phone Number)

(Applicant's Email Address)

with respect to the Engineering Permit Application (the "Application") to \_\_\_\_\_  
(Brief Description of Application)

It is understood, that:

1. the Resort Municipality of Whistler (RMOW) 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 RMOW, 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 authorization appointment; 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 requested.**

If an **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

\_\_\_\_\_  
Name of Corporation/Society

By its Authorized Signatory(ies)

Print Name of Witness: \_\_\_\_\_

Signature of Authorized Signatory

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

All Individual Persons Who Are a Registered Property Owner and are not an Applicant must sign this Authorization:

\_\_\_\_\_  
**Signature of Witness**

\_\_\_\_\_  
**Signature of Owner**

Print Name of Witness: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_