

Owner's Authorization Form

Application number: _____



Updated: August 1, 2022

Property Information

Municipal Address(es): _____

Legal Description(s): _____

Project Description: _____

Registered Owner Name(s): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Please be advised that I/we, the registered owner(s) of the above-mentioned property(ies)
(Select one)

- Will apply for all applications related to the above-mentioned project
- Authorize the following agent to apply for all applications related to the above-mentioned project on my/our behalf.
- Authorize the following agent access to property information related to the above address on my/our behalf

Building and Permitting
1435 Water Street
Kelowna, BC V1Y 1J4
TEL 250-469-8960
FAX 250-862-3314
developmentsservicesinfo@kelowna.ca

Community Planning
1435 Water Street
Kelowna, BC V1Y 1J4
250-469-8626
www.kelowna.ca

Agent Name:	Agent Company:
Mailing Address:	
City:	Province:
Postal Code:	Telephone:
Cell:	Email Address:

I/We agree to immediately notify the City of Kelowna, in writing, of any changes regarding this information.

Owner's Name(s) (print): _____

Owner's Signature(s): _____ Date: _____