

OWNER PERMISSION FORM

THIS FORM IS TO BE COMPLETED IN FULL BY THE REGISTERED OWNER OF THE LAND THAT IS SUBJECT OF THE APPLICATION OR BY AN AGENT AUTHORIZED TO ACT ON THE REGISTERED OWNERS BEHALF.

I, _____ hereby give consent to _____
(Print Name of Registered Owner or Agent) (Print Name of Applicant)

to proceed with application submissions for my property listed below:

Civic Address: _____

Mailing Address (if different): _____

Tax Roll: _____ Lot: _____ Block: _____ Plan: _____

Registered Owners as on Title (Print) _____

I/we _____ hereby certify that:

I/we am the registered owner

I am the agent authorized to act on behalf of the registered owner.

Phone #: _____

Signature: _____

Address: _____

Date: _____

The personal information collected on this form is collected for administrative purposes. The personal information is collected under the authority of the Protection of Privacy Act, Section 4(c). For questions about the collection of personal information, contact the Town of Vegreville Privacy Officer at privacyofficer@vegreville.com, 780-632-7951 or 4829-50 Street, Box 640, Vegreville, Alberta T9C 1R7.