



CITY OF WEST KELOWNA

Development Services Building Department

3731 Old Okanagan Highway West Kelowna, BC,
V4T 0G7 Phone: 778-797-8820

Owner's Authorization

Form

PROPERTY INFORMATION

Civic Address:

Registered Owner Name(s):

Mailing Address:

City:

Province:

Postal Code:

Phone:

Email:

Signature(s):

Dated:

Please be advised that I/we, the registered owner(s) of the above-mentioned property (select applicable):

Authorize the following applicant/agent to apply for all applications related to the above-mentioned property on my/our behalf.

Provide to the City of West Kelowna all information and documents required for applications related to the above-mentioned property on my/our behalf.

Authorize the following applicant/agent access to property information related to the above-mentioned property on my/our behalf.

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

Applicant/Agent Name:

Company Name (if applicable):

Business Licence # and issuing Municipality:

Mailing Address:

City:

Province:

Postal Code:

Phone:

Email Address

Signature(s):

Dated: