

## Property Ownership Assignment of Agent

Owner of Record: Property I	iber PID#	
• •		(as it appears on your Tax bill)
Name		Home Phone
Name (Co-owner)		Business Phone
Address		Cell Phone
Community	Province	Postal Code
By signing this form I authorize t	the person below	to act on my behalf and have access to
information relating to this proj	ect	located at civid
address	, in the o	community of
Print Name Owner		Signature Owner
	/	
Date	, , , , , , , , , , , , , , , , , , ,	E-Mail Address
Authorized Agent:		
Name		Home Phone
Address		Business/Cell Phone
Community	Province	Postal Code
	/	
Print Name Authorized Agent		Signature Authorized Agent
Date	/	E-Mail Address