

City of Barrie
Development Services Department - Planning
70 Collier Street, P.O. Box 400,
1st Floor, City Hall,
Barrie, Ontario, L4M 4T5
(705) 726-4242

Owner Authorization - Planning Applications (Property Owner Consent Form)

I,		☐ Property Owner	☐ Delegated Official with Signing Authority	
First Name / Last Name		(Select one)	•	
Company Name (if applicable)				
of,				
Street Address	Unit #	City or Town	Province	Postal Code
Telephone No.		Email		
hereby give permission to:				
Applicant - First Name / Last Name				
Applicant 1 list Name / East Name				
Company Name (if applicable)				
Authorized Agent - First Name / Last Name				
Company Name (if applicable)				
to act as my authorized agent to apply for an application(s) for:				
Street Address	Unit #	City or Town	Province	Postal Code
If there are any changes in the above information and/or I wish to withdraw this authorization, I must notify the City of Barrie in writing.				
Owner Signature (I have the authority to bind	the corporatio	n, where applicable)	[Date