



City of Welland
Infrastructure and Development Services
 Planning and Building Division
 60 East Main Street, Welland, ON L3B 3X4
Phone: 905-735-1700 Ext. 2251 | **Fax:** 905-735-8772
Email: devserv@welland.ca | www.welland.ca

OFFICE USE	DATE RECEIVED
Permit No. _____	
Building No. _____	

Authorized Agent Authorization Form

A. Project information

Street Address: _____ Unit No.: _____ Lot/Con: _____

B. Party to be authorized

Last Name: _____ First Name: _____

Corporation or Partnership: _____

Street Address: _____ Unit No.: _____ Lot/Con: _____

Municipality: _____ Postal Code: _____ Province: _____

Telephone Number: _____ Cell Number: _____ Email: _____

C. Declaration of Owner

I, _____, being the Registered Owner of the above property hereby authorize the party stated in Section B of this form to make application for permit on my behalf to Building Services of the City of Welland in accordance with the applicable requirements of the Ontario Building Code for the purpose of the identified project.

Date: _____ Signature: _____

The Ontario Building Code states that “owner includes, in respect of the property on which the construction or demolition will take place, the registered owner, a lessee or mortgagee in possession”.

Personal information contained in this form is collected under the authority of subsection 8(1.1) of the Building Code Act, 1992, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to the Chief Building Official of the City of Welland.