

Temporary Use Permit Application

Applicant(s)			
Name:			
	Email:		
Owner(s) of Property			
Name:			
	Email:		
Name:			
	Email:		
Property	Information (Civic address of properties to which this TUP will be applicable to:)		
Property Address(es):			
Is a building permit required subsequent to the issuance of this TUP?			
Yes (Application should be submitted at the same time as TUP application)			
Purpose of Application			
	· · · · · · · · · · · · · · · · · · ·		

Fees (to be paid at time of application, please check all applicable)

	Quantity	Fees
TUP Fee		
Site Profile		
Total Fees:		

Applicant Acknowledgement

Any personal information that is collected on this form will be managed in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have any questions or concerns regarding the collection, use, disclosure or safeguarding of personal information associated with this form, please direct enquiries to the Corporate Services department at (604)793-2986.

LETTER OF AUTHORIZATION & RELEASE FORM

DATE:		<u></u>		
ATTENTION:	CITY OF CHILLIWACK			
I/WE				
REGISTERED OWNERS	S(S) OF PROPERTY(IES) AT:			
AUTHORIZE:				
To act as my/our agent in the matter of obtaining an application for: Development Permit, Subdivision, Boundary Adjustment, Strata Conversion, Rezoning, Development Variance Permit, Temporary Use Permit, Agricultural Land Reserve and/or Building Permit on the land(s) described above. Said authorization also includes permissions to view and/or copy any relevant documentation or permits related to the above property(ies). Additionally, authorize the City of Chilliwack to release sources of information and support documentation pertinent to the application(s) listed above. Sources of information and support documentation include, but are not limited to,				
	nt reports, site plans, drawings, app	··		
ALL REGISTERED OWNERS MUST PROVIDE SIGNATURES, FULL NAME AND CONTACT INFORMATION				
Print Name		Signature		
Phone Number		E-mail Address		
Print Name		Signature		
Phone Number		E-mail Address		
Print Name		Signature		
Phone Number		E-mail Address		