

LETTER OF AUTHORIZATION

DATE: _____

ATTENTION: CITY OF CHILLIWACK

I/WE _____

REGISTERED OWNERS(S) OF PROPERTY AT:

AUTHORIZE: _____

To act as my/our agent in the matter of obtaining an application for a Short-Term Rental Accessory Home Occupation Business Licence on the land described above.

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