

AUTHORIZATION TO ACT ON BEHALF OF THE OWNER

AUTHORIZATION: Must be filled in if by the Owner if the Applicant and/or Agent is not the registered Owner of the lands. Please provide names of all owners of the Corporation or numbered Company.

I/We, _____,
(Names of Owners)

being the registered owner(s) of the lands subject of this application hereby authorize

(Name of Person)

of the Town/City of _____
(Town, City or Township)

in the Regional Municipality of _____
(Region, County or District)

to make application on my/our behalf to the Town of Fort Erie for a Rodent Control Rebate through the Council approved program.

Dated at the Town/City of _____
(Town, City or Township)

in the Regional Municipality of _____
(Region, County or District)

this _____ day of _____ 20 _____

Owner Signature

Witness

Owner Signature

Witness

CORPORATE SEAL

NOTE: IF THE REGISTERED OWNER IS A CORPORATION, THE CORPORATE SEAL MUST BE AFFIXED TO THIS FORM IN ADDITION TO THE SIGNATURE OF AUTHORIZED SIGNING OFFICERS.