

## AUTHORIZATION TO ACT ON BEHALF OF THE OWNER

## Must be completed if Applicant is not the registered Owner of the Short Term Rental Property

I/We, 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 with Part IV. Licenses of the Municipa	to the Town of Fort Erie for a Short Term Rental Licer al Act, 2001, as amended.	nce in accordance
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 signature	-
Owner signature	Witness signature	-