



**City of Revelstoke
Development Services**
216 Mackenzie Ave, Revelstoke, BC
250-837-3637 | building@revelstoke.ca

APPLICATION FORM APPOINTMENT OF AGENT

Property Information
Civic Address: _____
Project Description: _____

Agent																										
Name: _____ Phone: _____																										
Address: _____ City: _____ Postal Code: _____																										
Email address: _____																										
<table border="1"> <thead> <tr> <th>Application Type</th> <th>Application Number</th> </tr> </thead> <tbody> <tr><td>Building</td><td></td></tr> <tr><td>Plumbing</td><td></td></tr> <tr><td>Demolition</td><td></td></tr> <tr><td>Development</td><td></td></tr> <tr><td>Development Variance</td><td></td></tr> <tr><td>Subdivision</td><td></td></tr> <tr><td>Strata Conversion</td><td></td></tr> <tr><td>Site Profile</td><td></td></tr> <tr><td>Sign</td><td></td></tr> <tr><td>Rezoning</td><td></td></tr> <tr><td>OCP Amendment</td><td></td></tr> <tr><td>Other:</td><td></td></tr> </tbody> </table>	Application Type	Application Number	Building		Plumbing		Demolition		Development		Development Variance		Subdivision		Strata Conversion		Site Profile		Sign		Rezoning		OCP Amendment		Other:	
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<p>I am the owner of the above referenced property and hereby authorize the above noted agent to represent me in the application(s) noted in the table above. I acknowledge that it is my responsibility as the Property Owner to ensure full compliance with the Building Code, the Zoning Bylaw, Building Bylaw and any other applicable legislation.</p> <p>I hereby authorize the above noted agent to act on our behalf in all manners relating to the above noted applications. Any and all acts carried out by the agent on our behalf shall have the same effect as acts of our own. <i>All Property Owners must Sign Agent Authorization Form.</i></p>																										
Registered Owner Name: _____																										
Registered Owner Signature: _____ Date: _____																										
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