



2120 Rte 25, West Covehead PEI

902-672-2600



development@northshorepei.ca

## **PARCEL OWNER AUTHORIZATION FORM**

## Attach this Authorization Form to the Development Permit if the Parcel Owner is NOT the **Applicant.**

PARCEL OWNER INFORMATION (as it appears on the Development Permit Application Form)				
Name:	Email:	Phone:		
Mailing Address (Civic Number, S	treet, Community):	Postal Code:		
AUTHORIZATION:				
I,	(Parcel Owner's Nan	ne),		
authorize				
	(Applicant Name as Development Permi	· ·		
to submit a Development Permi may be provided by the applicar	Application on my behalf. Any correspon tt.	dence or required documents		
Signature of Parcel Owner:				
Date Signed YYYY-MM-DD):				

OFFICE USE	CIVIC ADDRESS:	PID #:
	DATE RECEIVED:	APPLICATION #:
	RECEIVED BY:	