Letter of Authorization



Property Information	
Property Owner's Name(s):	
Property Address:	
Town, Province, Postal Code:	
Phone Number:	
Agent Information	
Agent's Name:	
Authorization	
I/We authorize the agent listed above to act application for:	on my/our behalf as my agent in matters related to this
Note: Future Correspondence	
	g them to the project through Cloudpermit, Middlesex updates related to the permit application will be shared
Signature	
Signature of Property Owner:	Date:
	d under the Municipal Freedom of Information and Protection of Privacy Act. The ntre to process the request and to ensure compliance with all applicable statues, ellection to the Clerk's Office at 519-666-0190.

→ Please direct any questions and return this form to: Municipality of Middlesex Centre 10227 Ilderton Road, Ilderton, ON, N0M 2A0 519-666-0190 ext 5241 or 1-800-220-8968 | <u>building@middlesexcentre.ca</u>