

Requestor Information

<i>File No. (if applicable)</i>		<i>Closing Date (yyyy-mm-dd)</i>	
<i>Address:</i>		<i>City/Postal Code:</i>	
<i>Reason for Request:</i>			
<div style="display: flex; justify-content: space-around;"> Purchase Refinancing Other: _____ </div>			
<i>Legal Description</i>			
<i>Assessed Owners</i>			
<i>New Owners</i>			

Applicant Information

<i>First Name</i>	<i>Last Name</i>	<i>Law Firm/Company Name (if applicable)</i>	
<i>Address</i>	<i>City/Town</i>	<i>Province</i>	<i>Postal Code</i>
<i>Email Address:</i>		<i>Telephone #:</i>	

Payment Method

<p>Please ensure that associated fees of the application have been made with through the following options,</p> <ul style="list-style-type: none"> • Pay in person at 5684 Trafalgar Rd, Hillsburgh with Debit, Credit or Cash • Mail in a Cheque or secure in drop box at front door of our office (5684 Trafalgar Rd) • E-transfer - send an e-transfer to epayments@erin.ca <ul style="list-style-type: none"> ○ Please do not set a password ○ Please note, to provide your mailing address, the application type and property address in order to retrieve your receipt from the Finance Department. • Over the phone with Credit (2% fee if over \$200.00)
<p>Please note, the enclosed property information letter will provide the following information, if applicable.</p> <ul style="list-style-type: none"> • Zoning and Official Plan Designation • Minor Variances Applications • Active Building Permits and/or Applications • Building Code Violations • Outstanding Property Standard Violations • Active Sign Permits and/or Applications • On-Site Sewage Connection • Water Servicing Connection

Owner's Authorization Form

(Required if Party other than Owner/Lessee is making this application)

Property Owner(s)/Lessee to complete the Owner's Authorization form to allow the Agent/Applicant to prepare, submit and act on behalf of the Property Owner(s)/Lessee with respect to this application.

Property Address: _____

I/We _____ (Print name of Owner(s)/lessee)

being the Owner(s) of the land being subject of this application do hereby authorize and appoint

Name: _____ (Print name of applicant)

Company: _____ (Print name of company)

to act as my / our Agent to make this application on my/our behalf and to conduct all communications on my/our behalf respecting same.

This document shall serve to notify the Town of Erin that I am/we are the legal owner(s) of the property described above and do authorize the person indicated below ("Authorized Agent") to act on my/our behalf on all matters pertaining to the Building Permit Application and authorize the Authorized Agent to sign all related documents on my/our behalf. I understand that I shall be responsible for the terms and conditions contained in the permit.

Owner's Signature: _____

Date: _____ Telephone: _____