

PART 2: OWNER AGENT AUTHORIZATION

ONLY fill out if applicant is **NOT** the registered owner.

PROJECT ADDRESS: _____

I am the registered Owner of the above referenced property and as such, I hereby authorize the Agent named below to represent me in:

1. Applying for and obtaining a building permit from the District of Peachland under the provisions of Building Bylaw No. 2273, 2020, and;
2. Providing to the District, as my agent, all information and documents required by the Bylaw for such an application.

The Agent may also have access to building plans on file with the District that may be required to complete the project. Furthermore, I authorize the Agent to act as the primary contact with respect to attending to all matters related to the project.

Agent Name: _____ **Company Name:** _____

Mailing Address: _____ **City:** _____ **Province:** _____ **Postal Code:** _____

Agent Phone: _____ **Agent Email:** _____

Business Licence No.: _____

OWNER RESPONSIBILITY

I/We accept and understand that during any construction I/we have the overall responsibility for assuring the building conforms to the requirements of the BC Building Code. The process of assessing conformity to the requirements during construction is the responsibility of the registered professionals for complex buildings (Part 3 BC Building Code), and the designer/builder for standard buildings (Part 9 BC Building Code).

I/we further understand that this authorization will remain in full force and effect until the permit expires, which is two (2) years after the permit has been issued, OR until I/we notify the District of Peachland in writing that it has been revoked.

I/we hereby agree to release, indemnify, and save harmless the District of Peachland, its employees and agents from and against all claims, liability, judgements, costs, and expenses of every kind including negligence which I or any other person, partnership, or corporation or our respective heirs, successors, administrators, or assigns may have or incur in consequence of or incidental to this application.

REGISTERED OWNER INFORMATION

Owner Name(1): _____

Owner Name(2): _____

Mailing Address: _____ **City:** _____ **Province:** _____ **Postal Code:** _____

Owner Phone: _____ **Owner Email:** _____

Owner (1) Signature: _____	Date: _____
Owner (2) Signature: _____	Date: _____