



**TOWNSHIP OF BROCK
1 CAMERON ST. E.
CANNINGTON, ON L0E 1E0
PHONE - 705-432-2355
FAX – 705-432-2189**

Letter of Authorization

Building Permit Number _____
Owner Name(s) _____
Property Address _____
Date _____

The undersigned, registered property owner(s) of the above noted property, do hereby authorize _____, to make applications and amendments to applications on our behalf, as well as act as our agent for the property. It is understood that we will abide by all by-law and acts of the Township of Brock and that any approvals granted by any applicable application will be carried out in accordance with the municipal requirements.

Property Owner Signature(s): _____
