

OWNER'S AUTHORIZATION FORM
Private Tree Permit Application – Appendix A

Address of Subject Property

I/we, the registered owner(s) of the above property authorize the below noted Applicant to apply for a Private Tree Removal Permit on my/our behalf. I/we authorize the Applicant to be the principal contact with the City of Burlington for this application.

Registered Owner's Name(s) (please type or print)

Registered Owner's Signatures

Date

Authorized Applicant (please type or print)

Name

Company Name (if applicable)

Street Address

City/Town

Province

Postal Code

Telephone No.

Email Address

Collection of Information

Personal information contained on this form is collected under the authority of the Municipal Act, 2001, S.O. 2001, c. 25, for the purpose of obtaining a Private Tree Permit. Questions about this collection can be directed to the Manager of Urban Forestry, City of Burlington, 426 Brant St., Burlington, Ontario, L7R 3Z6, 905-335-7600, ext. 6167.