

# Owner's Undertaking and Authorization (Schedule 2 & 3)

## Delta Building/Plumbing Bylaw No. 8065, 2021



SUBJECT PROPERTY ADDRESS	
Civic Address(es)	
PID(s)	
APPLICATION INFORMATION	
Application Type	
Applicant Name*	

\*Please provide the applicant's contact information via the online application process.

This undertaking is given by the undersigned, as the owner(s) of the property described above, with the intention that it be binding on the owner(s) and that Delta will rely on same.

I confirm that I have applied for a permit pursuant to "Delta Building/Plumbing Bylaw No. 8065, 2021" and that I have carefully reviewed and fully understand all of the provisions of the Bylaw and in particular, understand, acknowledge and accept the provisions describing the purpose of the Bylaw, the conditions under which permits are issued, the disclaimer of warranty or representation and the limited extent of the scope of the Bylaw and inspections thereunder.

Without in any way limiting the foregoing, I acknowledge fully that it is my responsibility, whether or not any work to be performed pursuant to the permit applied for is done by me, a contractor or a registered professional, to ensure compliance with the Building Code and the Bylaw.

I am not in any way relying on Delta or the **Building Officials** of Delta, as defined under the Bylaw, to protect the owner or any other persons as set out in Section 1.2 of the Bylaw and I will not make any claim alleging any such responsibility or liability on the part of Delta or its **Building Officials**.

As the owner of the above referenced property, I/we hereby authorize the above-noted designated applicant to represent the owner(s) in the permit application and to receive the permit on our behalf.

### **OWNER'S INFORMATION**

Must include all owner(s) on the title of subject property(ies). Please complete if you own an individual strata unit.

Name of Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

If more owners are on the title of the subject property(ies), please attach additional sheets.



**STRATA AUTHORIZATION INFORMATION**

For strata properties, authorization must be obtained from the Strata Council (or an authorized representative of the strata - please note title within strata below).

I/We have signing authority for the Strata Council of the above mentioned referenced property and hereby confirm that permission for this application has been granted by the Strata Council.

Name of Representative(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

