Form - Owner Authorization

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.

OWNER'S UNDERTAKING

1. DESIGNATION OF APPLICANT

The designated applicant will serve as the City's primary contact and may requested to attend meetings with City staff, engage in discussions with staff or receive correspondence pertaining to the application.

2. SUBMISSION REQUIREMENTS

Applications must be accompanied with all supporting information required. Incomplete applications will be rejected until all required information is provided. The City of Delta reserves the right to retain on file plans and materials submitted in connection with the applications.

3. PUBLIC NOTICE SIGNAGE

Applicants may be required to post one or more signs on the subject property(ies), at their expense, in accordance with the Delta's Development Application Procedures Bylaw, as amended. Instructions will be provided by planning staff.

4. LEGAL COSTS

The owner(s) hereby agrees to assume all legal costs directly incurred by the City of Delta through the processing or approval of this application and the preparation and registration of any related legal documents.

5. DEVELOPMENT COST CHARGES

The owner(s) hereby acknowledges that Development Cost Charges may be required by Metro Vancouver, TransLink, and the City of Delta in accordance with the Delta's Development Cost Charges Bylaw, as amended.

6. ENGINEERING SERVICES

The owner(s) hereby acknowledges that a Development or Servicing Agreement may be required in accordance with Delta's Subdivision and Development Standards Bylaw, as amended.

7. OWNER/STRATA AUTHORIZATION

I/We hereby authorize the above-noted application and applicant.



Application Centre, Community Planning & Development Contact Us: 604-946-3380 or CPD@delta.ca

November 2022

Delta



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	y(ies), please attach additional sheets.
the strata - please note title within strata below). I/We have signing authority for the Strata Council of t permission for this application has been granted by th Name of Representative(s):	
Mailing Address:	
City:	Postal Code:
Phone:	Email:
Signature(s):	
Date:	
Application Centre, Community Contact Us: 604-946-3380 or CPD@delta.c	