



Northeastern
PUBLIC HEALTH
SANTÉ PUBLIQUE
du Nord-Est

Land Control – Owner Authorization

inspections@nepb.ca
1-877-442-1212
Postal Bag 2012,
Timmins, ON P4N 8B7

Authorization for an Application for a Sewage System Permit by a Person Other than the Legal Owner

I, _____ being the legal owner of the subject property described as:
street address _____

and/or (complete all that apply)

Lot ____ Concession _____ Sub lot ____ Parcel ____ Plan ____ Mining Claim ____
Township of _____ District of _____

Authorize: _____

Mailing address: _____

Phone number(s): _____

Email address: _____

to apply for a Sewage System Permit and the associated site inspection(s) on my behalf.

Signature of Legal Owner: _____

Date (YYYY-MM-DD): _____

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the Building Code Act, 1992, and will be used in the administration and enforcement of the Building Code Act, 1992. Questions about the collection of personal information may be addressed to:

- a) Northeastern Public Health's Privacy Officer, or
- b) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing, 777 Bay Street, 2nd Floor, Toronto, Ontario, M5G 2E5, 416-585-6666.