

Authorization Form

11 Hudson Street, Blind River, Ontario, P0R 1B0

Tel.: (705)356-2251 Fax.: (705)356-7343

For use by the Town of Blind River	
Date Received:	Roll Number: 57-38-000-
Application submitted to :	The Corporation of the Town of Blind River
	-
Please check all that apply:	
☐ Request information on behalf of property	owner (Assessment Roll Number; Legal Description)
☐ Make application on behalf of property ov	vner for the following permits:
☐ Building/ Demolition	☐ Installation of 9-1-1 Sign
☐ Excavation	☐ Installation of Culvert
☐ Plumbing	☐ Installation of Water Service
☐ Blasting	☐ Installation of Sewer Service
I	, being the legal registered owner of the property located at (civic /9-1-1 Address) and having the tax Assessment
Roll No.: 57-38-000-	, being Lot/ Part/ Parcel/ Block
Plan	nereby authorize
to make application or request property inform	nation from the Town of Blind River with regard to above
noted property.	
Print Name	Signature of Owner
Date	Address
	Telephone
	reiephone