



REGIONAL DISTRICT of CENTRAL OKANAGAN INSPECTION SERVICES – BUSINESS LICENSING

Owner Authorization Form

Civic Address:	
Legal Description:	
Registered Owner(s):	
Mailing Address:	
Phone:	Email:
<i>Please be advised that I/we the registered owner(s) of the above mentioned property,</i>	
<input type="checkbox"/> <i>authorize the following named to operate their business on my property, in compliance with the regulations of all applicable RDCO Bylaws and other authority requirements</i>	
<input type="checkbox"/> <i>authorize the following business access to property information related to the above address on my/our behalf</i>	
<input type="checkbox"/> <i>authorize the following agent to apply for the named business licence and act on our behalf</i>	
<i>Business Name:</i>	
<i>Business Owner /Agent:</i>	
<i>Business Description:</i>	
<i>Mailing Address:</i>	
<i>Phone:</i>	<i>Email:</i>

I/We agree to immediately notify the Regional District of Central Okanagan, in writing, of any changes regarding this information.

Owner's Name(s) (printed):

Owner's Signature(s):

Date:

Completed form can be emailed to business@rdco.com