Commercial Revitalization Grants Program

Commercial Property Owner's Authorization Form

I, _____, of _____, the owner of the property
(owner) (city)
located at _____, have read the complete application by
(property address)
the leasee, or an agent of the leasee, of the above-noted property and concur with and give my consent to the work proposed in the application.

I agree not to involve the City of Fort Saskatchewan in any legal action between myself and any contractors, estimators, employees, workers or agents arising from the Commercial Revitalization Grants Program.

I give my consent to the City to make all inspections necessary to confirm the approved plans are implemented in accordance with expected standards outlined within the City of Fort Saskatchewan's Downtown Area Redevelopment Plan (if applicable).

This personal information is being collected and used under the authority of Section 4(c) of the Protection of Privacy Act for the purpose of the Commercial Revitalization Grants Program. If you have questions about the collection, contact the Access to Information Coordinator for the City of Fort Saskatchewan at 780-992-6200.

Signature and Submission

Signature: Date:

_____ _____

Tenant Signature: Date:

_____ _____