

AUTHORITY TO ACT FORM

1 OWNER/S DETAILS

Name of owner/s

Company Name

Address

Street Address:	
Suburb:	
State:	P/Code:
Phone Business hours:	Mobile:
Email:	

2 SITE DETAILS

Address (please note a Copy of title /contract of sale is required to confirm ownership of the land/building)

Street Address:	
Suburb:	
State:	P/Code:

3 SIGNATURE OF OWNER/S

DECLARATION

I confirm I am the owner of the above site and consent to the following person acting on my behalf:

Name of agent or legal firm: _____

I also acknowledge that it is an offence to knowingly make any false or misleading statement or provide any false or misleading information to the Building Appeals Board in relation to an application (section 246 of the Act).

SIGNATURE OF FIRST OWNER: _____

PRINT NAME: _____

DATE: _____

SIGNATURE OF SECOND OWNER: _____

PRINT NAME: _____

DATE: _____