

District of Saanich

Parks Division

1040 McKenzie Ave.
Victoria BC V8P 2L4

t. 250-475-5522
f. 250-475-5525
saanich.ca



PARKS, RECREATION
& COMMUNITY SERVICES

AGENT AUTHORIZATION: To obtain tree permit

Date: _____

Civic Address of tree(s): _____

Lot: _____ Block: _____ Plan: _____

I/we _____

as the registered owner(s) of the above mentioned property, appoint:

_____ to act as agent.

As an agent is authorized to:

- Apply for and obtain a tree cutting permit for the proposed work at the above referenced address.
- View and obtain copies of all plans and tree cutting permits.
- Other, please specify: _____

Property owner(s) name(s) and contact information*:

Email: _____ Phone: _____

*If Strata property – this form is to be signed by the appropriate strata representative. Strata minutes that document the appropriate position(s) and name of the individuals who are authorized to act on behalf of the Strata are required in addition to this form.

Property owner(s) signature(s):

Date: _____