



Short-Term Accommodation Licensing Service

Agent Authorization Form

This form is required if the owner(s) authorize an individual (Agent) to act on their behalf for the purpose of applying for a Short-Term Accommodation Licence pursuant to the Town of Collingwood's Short-Term Accommodation Licensing By-law 2024-078. This form must be completed by the owner(s) and accompany the Short-Term Accommodation Licence Application.

I/We, _____ (Owner's Name(s))
being the registered owner(s) of the property located at
_____ (Property Address)

Collingwood, Ontario, hereby authorize

_____ (Agent's Name)
to submit a Short-Term Accommodation Licence Application, along with any additional
required documentation, on my/our behalf for the above-noted property, pursuant to the
Town of Collingwood's Short-Term Accommodation Licensing By-law 2024-078.

Agent's Contact Information

Name: _____

Telephone: _____ Email: _____

Owner's Acknowledgement

1. I/We hereby certify that I/we have reviewed the completed Short-Term Accommodation Licence Application, supporting documentation, and declarations and confirm that all submitted information is true, correct, and complete.
2. I/We agree to be bound by the application and all applicable conditions as if submitted directly by me/us.
3. I/We acknowledge that it is my/our responsibility to ensure that the property is at all times in compliance with all applicable laws, including the Short-Term Accommodation Licensing By-law 2024-078.
4. I/We understand that providing false or misleading information to the Town of Collingwood is an offence under the Short-Term Accommodation Licensing By-law 2024-078.
5. I/We further acknowledge that any licence issued based on false or misleading information may be revoked or suspended.

Owner's Contact Information

Name: _____

Mailing Address: _____

Telephone: _____ Email: _____

Owner's Name:

Signature: _____

Date: _____

Owner's Name:

Signature: _____

Date: _____