



The Municipality of the  
**VILLAGE OF BURK'S FALLS**

172 Ontario Street Box 160 Burk's Falls ON P:705-382-3138 F:705-382-2273 [www.burksfalls.net](http://www.burksfalls.net)

## **Authorization to Access Property Utility Information**

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### **Property Owner Information:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Account Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### **Authorized Third Party Information:**

Name: \_\_\_\_\_ Company (if applicable): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### **Authorization Statement:**

I, the undersigned, hereby authorize \_\_\_\_\_ to access and obtain information regarding my property, detailed above. This includes any relevant records, documents, and data related to the property specified. I understand that this authorization is given voluntarily and that I can revoke this permission at any time by providing written notice to both the third party and the entity holding the property information.

By signing this form, I confirm that the information provided is accurate and that I fully understand the scope of this authorization.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Please ensure that all sections are completed accurately. If you have any questions regarding this authorization, contact:

Village of Burk's Falls

Finance Clerk

Candy Shuker

705-382-3138 ext 225