



	ACKNOWLEDGEME	ENT AND AUTHORIZATION	
TO:	The Corporation of the City of M	ississauga (the "City")	
AND TO:	Realty Services, Corporate Busine	ess Services	
FROM:	(
ADDRESS	(name of owner of the property)		
ADDRESS:	(property owner's mailing addres	55)	
RE:	Encroachment Application to the Address of Property:	-	, Mississauga
_	ned is the registered owner of the nt on City lands and I/We hereby aut		chment/or a proposed
	Application for an Encroachment and undersigned.	Agreement to the City of Missis	sauga for the property
Date:		(Corporation Name, if ap	plicable)
		<u>Per:</u> (Signature)	
		(Print Name)	
		(Telephone Number)	
		(Email)	

Please attach the name, address and signature of any additional Property Owners on a separate sheet. All Registered Property Owner(s) need to sign this Authorization form