

# Building Plan Retrieval Letter of Authority

**\* This form accompanies a Building Plan Retrieval Request Form completed by an agent, acting on behalf of the owner of the property referred to below \***

I   
(Full Name)

Owner of   
(Address)

Hereby authorise   
(Full Name)

Of   
(Address)

To act as my agent to access all plans and information on the above mentioned property that the City of Kalamunda holds.

My contact details are as follows:   
(Phone)

(Address) (if different from above)

(Email)

Signature:

Date:

Copy of Driver's Licence attached:

*Please attached copy of owners drivers licence for property ownership verification*

Building Plan Retrieval Request Form attached:

Agent Identification Sighted:  Drivers Licence Number