



Reconsideration Application

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SECTION 1 – APPLICANT INFORMATION

| | |
|--------------------------------------------------|--------------------------------------------------|
| Registered Owner(s): _____ | Agent: _____ |
| Address: _____ _____ | Address: _____ _____ |
| Phone: _____ (home) _____ (work) Email: _____ | Phone: _____ (home) _____ (work) Email: _____ |

SECTION 2 – DECLARATION AND AUTHORIZATION

I / we declare that the information in this application is, to the best of my / our knowledge, true and correct.

Signature of Applicant(s): _____ Date: _____

If the application is submitted by an Agent, the owner(s) must sign the following statement or provide separate written authorization:

I / we consent to this application filed by the person or company whose name appears as the agent above.

Signature of Owner(s): _____ Date: _____

Personal information contained on this form is collected under the *Local Government Act* and in accordance with the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of processing the application and may be shared with the Directors of the RDEK and referral agencies. For questions or additional information pertaining to your personal information, contact the RDEK FOI Coordinator at 250-489-2791.

