

ACCESS TO INFORMATION AUTHORIZATION

I/We, _____, authorize my/our Listing Agent,
_____, to obtain information pertaining to my/our
property/properties located at:

for a period of _____ days.

***This authorization is given in accordance with the Freedom of Information and
Protection of Privacy Act regulations.**

Dated this _____ day of _____, 20____ at _____

Signed:

Name: _____

Name: _____

Witnessed:

Name: _____

Name: _____