



Short-Term Rental Owner/Landlord Consent form

Bylaw and Licensing Division

604.469.4541 • www.portmoody.ca

PROPERTY INFORMATION:

Civic Address: _____ PID _____

REGISTERED OWNER DETAILS:

Full Name: _____

Mailing Address & City: _____

_____ Postal Code: _____

Phone: _____ Email: _____

APPLICANT/STR OPERATOR DETAILS (Tenant Only):

Full Name: _____

Mailing Address & City: _____

_____ Postal Code: _____

Phone: _____ Email: _____

Please be advised that I/we, the registered owner(s) of the above-mentioned property:

- ☐ Have read the Short-Term Rental Business Licence Application Form submitted by the Operator;
- ☐ Authorize the Operator to apply for all applications related to the Short-Term Rental Business Licence Application;
- ☐ Consent to the above address being used as a Short-Term Rental in compliance with City of Port Moody Bylaws, and;
- ☐ Agree to immediately notify the City of Port Moody, in writing, of any changes regarding this information.

Registered Owners Name (please print)

Signature

Date

2nd Registered Owners Name (please print)

Signature

Date

Operator/Applicant Name (please print)

Signature

Date

Personal information collected through this form is collected, used, retained, disclosed, and disposed of in accordance with the Freedom of Information and Protection of Privacy Act and City of Port Moody bylaws. Should you have any questions or concerns about the collection of your personal information, please contact the Information and Privacy Coordinator at 604-469-4571 or foi@portmoody.ca.