



**VILLE DE GRACEFIELD**  
351, Route 105 C.P. 329  
Gracefield (Québec) J0X 1W0  
Téléphone : (819) 463-3458  
Télécopieur : (819) 463-4236  
www.gracefield.ca

## *Power of Attorney*

Roll number \_\_\_\_\_

I, \_\_\_\_\_, living at  
(name of the owner)

\_\_\_\_\_, \_\_\_\_\_ ( ) \_\_\_\_\_,  
(street number, street name, apartment) (Locality) (postal code)

hereby authorize \_\_\_\_\_ living at  
(name of the attorney)

\_\_\_\_\_, \_\_\_\_\_ ( ) \_\_\_\_\_,  
(street number, street name, apartment) (City) (postal code)

to sign on my behalf all relevant documents for a permit application regarding

\_\_\_\_\_ for my

property located at : \_\_\_\_\_, Gracefield, QC  
(street number, street name)

Signed in \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
(City) (day) (month)

X \_\_\_\_\_