



Town of Midland

575 Dominion Avenue
Midland, Ontario L4R 1R2
www.midland.ca
service@midland.ca
705-526-4275

Authorization to Access Municipal Property Information

Customer Information

Municipal Address (identified property). All fields are mandatory.

Street: _____ Town: _____
Postal Code: _____ Email Address: _____
Owner's Name: _____ Telephone: _____

Note: If owner on title is a corporation, please provide documentation that confirms you are an authorized signing officer of the corporation.

I, _____ as the owner of above property, give authorization to the Town of Midland to share the property account(s) information of the above referenced municipal property with _____ (the authorized individual). I understand that it can be any information relating to the municipal property, not limited to only Property Tax and Utility accounts. I further authorize the Town of Midland to update my record per the information provided on this form and share within the Town of Midland.

Effective date of Authorization - to access municipal property account(s) information:

YYYY ____ MM ____ DD ____

I understand that written notice must be submitted to the Town of Midland if I wish to terminate this authorization request.

Owner's Name: _____

Owner's Signature: _____ Date: _____

Return completed "Authorization to access municipal property information" form by email to service@midland.ca or by regular mail to the following address:

Attention: Town of Midland Customer Service
575 Dominion Avenue Midland, ON L4R 1R2

Personal information on this form is collected under the legal authority of the Municipal Act, S.O. 2001, c.25 as amended. The information is collected and maintained for the purpose of permitting authorized individuals to access information of the identified property pursuant to the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Clerk's Office, the Corporation of the Town of Midland, 575 Dominion Avenue, Midland, ON L4R 1R2 or by email to clerks@midland.ca.

For Internal use only:

Form Signed _____ Photo ID checked _____ Form attached in GP _____ Noted in GP _____

Tax Roll: _____ Water Account: _____

Date received: _____ Date Processed: _____ Processed by: _____

Form must be completed and signed by the owner with a copy of the owner's photo ID.