

**DATE:** \_\_\_\_\_

This form is for general enquiries only. Information related to a specific property of which you do not have ownership will not be released without a completed [Agent Authorization Form for Permit Application or File Access](#).

I understand by submitting this form I am consenting to the collection, storage, use and disclosure of my personal information for the purposes of responding to your inquiry in accordance with the *Freedom of Information and Protection of Privacy Act*. I understand that my personal information will be disclosed to a third-party service provider (i.e. website host Civic Plus) located in Canada for the purpose of processing my inquiry. If you have questions or concerns about the collection of your personal information please contact the Front Counter Supervisor, at [permits@coquitlam.ca](mailto:permits@coquitlam.ca) or 604-927- 927-3441.

Please complete the following section by **clearly** stating the details of your enquiry. **Please note, it may take staff 2-5 business days to complete your enquiry.**

**Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**SIGNED BY**

**X** \_\_\_\_\_