

**Instructions:**

Complete this form if you are authorizing a person to act on your behalf during a Screening Review or Hearing Review appointment.

The authorized person should bring this completed form with them to the scheduled Screening Review or Hearing Review appointment.

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_  
(Print your name) (Print Authorized Person's name)

to act and appear for me as my agent in the matter pertaining to Penalty Notice(s):

\_\_\_\_\_  
(Penalty Notice Number)

\_\_\_\_\_  
(Penalty Notice Number)

\_\_\_\_\_  
(Penalty Notice Number)

They may enter a plea to any infraction he or she deems fit towards completion of this/these matter(s), as authorized by me in writing.

I am aware that if there is a fine to be paid after the Screening Review or Hearing Review appearance, the ultimate responsibility to pay the fine(s) rests with me.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Date (yyyy-mm-dd)

Personal information is collected under the authority of the Municipal Act, 2001, S.O. 2001, c. 25, s.8, s.11 and will be used for the purpose of responding to your request. Your personal information will be protected in accordance with the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). Questions about this collection and use of your personal information may be directed to the Town of East Gwillimbury's Privacy and Information Coordinator at 905-478-4283 Ext. 1414, 19000 Leslie Street, Sharon, Ontario, L0G 1V0, [MFIPPA@eastgwillimbury.ca](mailto:MFIPPA@eastgwillimbury.ca).