



Authorization to Act as an Agent
Administrative Penalty System
Ontario Regulation 333/07, *Municipal Act 2001*

Instructions:

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

Send this form by email to parking@haltonhills.ca and ensure your agent brings a copy of 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)

The authorized individual named above may enter a plea to any infraction they deem fit towards completion of this/these matter(s), as authorized by me in writing.

By signing this form, I understand 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)