DOWNTOWN ORILLIA BUSINESS IMPROVEMENT AREA
ATTESTATION OF REPRESENTATIVE NOMINEE AUTHORIZATION

I, _____, being the:

- ☐ Assessed Owner
- ☐ Authorized Signing Officer of a Corporation
- ☐ Partner of a Partnership
- ☐ Sole Proprietor
- ☐ Authorized Representative of the Assessed Owner/Business

for _____ located at _____
(business/corporation name) BIA Address.

hereby attest and confirm that _____ is duly authorized to represent the
Nominee Name

above-noted assessed owner, business, or corporation and is authorized to stand for election and, if elected, serve as a Director on the Downtown Orillia BIA Board.

I further certify that:

1. The business or property identified above is located within the DOBIA boundary.
2. The nominee is authorized to represent the interests of the assessed owner, business, or corporation in matters relating to the Downtown Orillia BIA.
3. I/We have the authority to provide this authorization on behalf of the assessed owner, business, or corporation.
4. This authorization shall remain valid for the duration of the nomination and any resulting term of office unless revoked in writing and submitted to the Downtown Orillia BIA.

I make this declaration conscientiously believing it to be true.

Authorized Representative

Business/Corporation: _____ Name & Position: _____

Signature: _____ Date: _____

Contact Information: _____

Nominee Acceptance

I, _____, accept this nomination and confirm that I am willing to
Nominee Name

serve as a Director of the Downtown Orillia BIA Board if elected.

Signature: _____ Date: _____