
A Letter of Authority must be submitted if an applicant intends to have any person or agent act on their behalf or to represent them.

1. Provide Applicant Information

Name

File #

Application Type:

2. Provide Authorized Representative Information

Name

Phone #

Fax #

Email Address

3. Authorization by Applicant

I hereby give my authorization for the authorized representative noted above to communicate with Service Nova Scotia and Internal Services concerning my application.

Signature _____

Date

Mail to: **Service Nova Scotia and Internal Services
Refund/Rebate Section
PO Box 1529
Halifax, Nova Scotia B3J 2Y4**

Fax to: **(902) 424-0602**