



**ALBERTA LAND COMPENSATION BOARD**

**REPRESENTATIVE AUTHORIZATION**

**LCB FILE NO.:**

**CLAIMANT:**

**RESPONDENT:**

I, \_\_\_\_\_ (Claimant), authorize \_\_\_\_\_ (the “Representative”) to act on my behalf respecting my claim before the Land Compensation Board (the “LCB”), regarding land municipally described as \_\_\_\_\_, and legally described as:

PLAN      XXXXX  
 BLOCK    XX  
 LOT       X  
 EXCEPTING THEREOUT ALL MINES AND MINERALS

I understand my Representative can act on my behalf on all matters relating to my interest in this claim, including settling and withdrawing my claim.

I understand that the LCB may send all notices and communication to my Representative.

I understand that the LCB will deal with my Representative unless I provide notice in writing that I no longer want the Representative to act on my behalf.

Signed in \_\_\_\_\_, Alberta, this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
 [Signature]

**Address for service of Representative:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

The information collected on this form is necessary to allow the Land Compensation Board to perform its function. The information is collected under the authority of the *Freedom of Information and Protection of Privacy Act*, section 33(c). Section 33(c) provides that personal information may only be collected if the information relates directly to and is necessary for the processing of your application. The information you provide will be considered a public record. If you have concerns with your information begin part of the public record or if you have questions about how the Board deals with your information, please contact the Director, Land Compensation Board. Completed forms may be returned by email to [srb.lcb@gov.ab.ca](mailto:srb.lcb@gov.ab.ca) or by mail to: Land Compensation Board, 1229 – 91 Street SW, Edmonton AB T6X 1E9.