

THE UNIVERSITY OF BRITISH COLUMBIA Okanagan Campus

Application for Transportation Network Services Permit ("TNS Permit")

Applicant Name (hereinafter referred to as the "Applicant"):					
Incorporation Number:			Jurisdiction of Incorporation:		
BC Registration Number (if incorporated extra-provincially):					
Registered Office Information					
Street Address:					
City:	Postal / Zip Code:		Country:		
Applicant's Authorized Signatory and Contact Information					
Name: Email:		Email:			Phone:
CONDITIONS, AS MAY BE AMENDED FROM TIME TO TIME (THE "TNS PERMIT STANDARD TERMS AND CONDITIONS"). A COPY OF THE TNS PERMIT STANDARD TERMS AND CONDITIONS CAN BE FOUND AT THE FOLLOWING LINK: https://campusplanning.ok.ubc.ca/approvals/ ; AND 2. COMPLY WITH THE TNS STANDARD TERMS AND CONDITIONS. THE APPLICANT CONFIRMS THAT THE INFORMATION IN THIS APPLICATION FORM IS CORRECT.					
SIGNED BY THE AUTHORIZED SIGNATORY OF THE APPLICANT ON BEHALF OF THE APPLICANT AT:					
TH City, Province	IS Dat	DAY OF _	Month	20 Year	
APPLICANT SIGNATURE:	THORIZI	ED SIGNATOR	· · · · · · · · · · · · · · · · · · ·	_	

Applications may be submitted electronically to info.planning@ubc.ca or by mail to the address below:

Campus Planning Okanagan Campus Office Modular 1 - 1157 Alumni Ave Kelowna, BC Canada V1V 1V7

Revised September 2021