

**Note:** This form must be completed by the registered owner of the land or by an authorized person acting on behalf of the owner. Please contact the Town Office if you have any questions about the application prior to submitting to this application.

**OFFICE USE ONLY**

Receipt No:	Tax Roll Number:
Application File No:	Date Received:

**FEE INFORMATION (Check applicable fees)**

<input type="checkbox"/> \$50.00 (Garage/additions < \$25,000)	<input type="checkbox"/> \$200.00 (Conforming Developments > \$25,000 Homes)
<input type="checkbox"/> \$ 250.00 (Non-Conforming Developments)	<input type="checkbox"/> Late Fee (Double original fee if applying after development started): \$ _____

**APPLICANT INFORMATION**

Name:	Phone Number:
Address:	Email:

**LAND OWNER INFORMATION (if different from applicant)**

Name(s):	Telephone:
Address:	Email:
Consent: I/we hereby authorize the above person to act on our behalf on matters relating to this Development Permit application:	
Signature of Owner(s): _____ / _____ Date: _____	

**DEVELOPMENT INFORMATION**

Project Civic Address/Location:				Land Use District:		
Legal Description	Lot:	Block:	Plan:	Estimated Project Value: \$		
Existing Use of Property:						
Proposed Development:						
Parcel Dimensions	Length:	Width:	Total:	Site Coverage (%)	Current:	Proposed:
Setbacks	Principal Building			Accessory Building		
	Front:	Sides:	Rear:	Front:	Sides:	Rear:
Estimated Start Date:				Estimated Completion Date:		

**DOCUMENT(S) ATTACHED (See Land Use Bylaw for Required Documentation)**

<input type="checkbox"/> Site Plan	<input type="checkbox"/> Survey Plan	<input type="checkbox"/> Floor Plan	<input type="checkbox"/> Elevation Plan
<input type="checkbox"/> Landscape Plan	<input type="checkbox"/> List of Exterior Finishing Materials	<input type="checkbox"/> Others:	

**STATEMENT OF INTENT, DECLARATION AND CONSENT**

I/We \_\_\_\_\_ hereby:

- Make application under the provisions of the Land Use Bylaw for a Development Permit in accordance with the plans and supporting information submitted herewith and which form part of this application.
- Consent to receive by email any documents or communication related to this application.
- Give consent to allow a person appointed by Council, the right to enter the above land with respect to this application only.
- Declare that the information given on the form is complete and is, to the best of my knowledge, a true statement of the facts relating to this application.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOIP DECLARATION**

*This personal information is being collected under the authority of the Municipal Government Act (MGA) and the Freedom of Information and Protection of Privacy Act (FOIP) and is managed in accordance with the provisions of FOIP, unless disclosures are authorized under the LUB. This information will be used to process and make a decision on the application. If you have any questions about the collection and use of your information, contact the FOIP Coordinator, Town of Fairview at: (780) 835-5461*