



Application for Development Permit

Land Use Bylaw No. 01-99

Municipal District of Foothills No. 31

www.mdfoothills.com

309 Macleod Trail, Box 5605, High River, AB T1V 1M7. Tel: 403-652-2341 Fax: 403-652-7880

THIS IS NOT A BUILDING PERMIT. Construction practices and standards of construction of any building or any structure authorized by this Development Permit must be in accordance with the Building Bylaw. An application must be made for a Building Permit under the requirements of the Building Bylaw and a Permit must be secured before any work or construction on any building may commence or proceed.

Fee Submitted: _____ Application No.: _____

Receipt No.: _____ Tax Roll No.: _____

Date Received: _____

PART 1 APPLICANT/AGENT INFORMATION

Applicant's Name: _____

Applicant's Mailing Address: _____

Telephone: _____

Legal Land Description: Plan _____, Block _____, Lot _____, LSD _____,

Quarter _____, Section _____, Township _____, Range _____, West of the _____ Meridian.

Registered Owner of Land: _____

Registered Owner Mailing Address: _____

Telephone: _____

Interest of Applicant if not owner of site: _____

PART 2 PROPOSED DEVELOPMENT

I/We hereby make application in accordance with the plans and supporting information submitted herewith. (which forms part of this application). Please give a brief description of the proposed development, including name of development where applicable.

PART 3 SITE INFORMATION

Area Of Lot: (In Acres Or Hectares) _____

Size Of Proposed Building: _____ Height: _____

Is There A Dwelling (Residence) On The Site: _____ If Yes, How Many?: _____

Utilities Presently On Site: _____

Are There Sour Gas Or High Pressure Facilities On Site?: _____

Utilities Proposed: _____

Other Land Involved In Application: _____

DISCLAIMER: Please note that the personal information collected on this form is authorized under the Municipal Government Act and is required for the purpose of the MD's Planning and Development processes. This information may also be shared with appropriate government agencies and may also be kept on file by those agencies. The application and related file contents will become available to the public and are subject to the provisions of the Freedom of Information and Protection of Privacy Act (FOIP). If you have any questions about the collection and use of this information, please contact the MD Municipal Planner at 403-652-2341.

PART 4 DEVELOPMENT

Specify other supporting material attached that forms part of this application.
(e.g. Site Plan, Plot Plan, Architectural Drawings, etc.):

Estimated Date of Commencement: _____ Estimated Date of Completion: _____

I, _____ hereby certify that I am:

- The Registered Owner; or
- Authorized to act on behalf of the Registered Owner

Date: _____

RIGHT OF ENTRY

I, being the owner or person in possession of the above described land and any building thereon, hereby consent to an authorized person designated by the MD of Foothills No. 31 to enter upon the land for the purpose of inspection during the processing of this application.

Date Signature of Owner or Authorized Agent

FOR OFFICE USE ONLY

1. Land use district: _____

2. Listed as a permitted/discretionary use: _____

3. Meets setbacks: Yes _____ No _____ If "No", deficient in _____

4. Other information: _____

PART 5 DECISION

Date of Decision: _____ Date Application Accepted: _____

This Development Permit Application is:

- APPROVED
- APPROVED subject to the attached conditions
- REFUSED for the attached reasons

Notice of Decision Advertised: _____

Date of Issuance of Development Permit: _____

Development Officer

****IMPORTANT NOTE: Applications must be received with original signed signature. Photocopies, faxes and emails will not be accepted.**

NOTE: Development must commence within 12 months of the date of the Date of Issuance of the Permit and be completed within 24 months of the Date of Issuance, unless otherwise stated in the Development Officer's decision.