



## Development Permit Application Form

This form must be completed in full and submitted for all development permit application types along with the completed applicable checklist. Any applications missing information may be refused.

<b>OFFICE USE ONLY</b>	Fee Paid \$ _____	DP# _____	Roll # _____
OSL Paid <input type="checkbox"/>			

### Applicant Information

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

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

### Proposed Development

Address of Proposed Development: \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_

Description of Use:

Residential  Commercial  Industrial  Institutional

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Registered Owner

Registered Owner of Land: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Please indicate your preference to receive correspondence on this application by choosing one of the following. If none chosen, or if information provided is unclear, Canada Post will be the default choice.

<input type="checkbox"/> Mail (Canada Post)	<input type="checkbox"/> Email	<input type="checkbox"/> Fax
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**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_