



APPLICATION for
Amendment of Land Use Bylaw

OFFICE USE ONLY

Town of Drayton Valley
Planning & Development Department
5120 – 52nd Street, Box 6837
Drayton Valley, AB T7A 1A1
Phone: (780) 514-2200 Fax: (780) 542-5753
www.town.draytonvalley.ab.ca

Application Fee: \$840.00

Receipt #: _____

*All Sections Must Be Completed In FULL
~PLEASE PRINT~*

SECTION 1 – APPLICANT CONTACT INFORMATION

Date: _____

Applicant's Full Name: _____ Phone No.: _____ (Home) _____ (Work)

Mailing Address: _____ (City) _____ (Province) _____ (Postal Code)

Signature of Applicant: _____ Date: _____

SECTION 2 – PROPOSED AMENDMENT

Section of Land Use Bylaw: _____ Section Title: _____

Amendment of: ☐ Zoning (Complete Sections 3 & 4)
☐ Verbiage (Complete "Proposed Amendment" & Section 3)

Proposed Amendment: _____

SECTION 3 – REASONS IN SUPPORT OF APPLICATION FOR AMENDMENT:

SECTION 4 – PORTION OF LANDS TO BE REZONED (Attach Map – PDF or dgg, if possible)

Lot: _____, Block: _____, Plan: _____
_____ section of _____ -49-7-W5M

Current Zoning: _____

Proposed Zoning: _____

Registered Owner's Full Name: _____ Phone No.: _____ (Home) _____ (Work)

Mailing Address: _____ (City) _____ (Province) _____ (Postal Code)

Signature of Registered Land Owner: _____ Date: _____

Received by the Town of Drayton Valley this _____ day of _____, 20____.