

STATUTORY PLAN & LAND USE BYLAW AMENDMENT APPLICATION



OFFICE USE ONLY

Revised December 2024

Date Received:

File No.:

| | | | | | |
|------------------------------|-----------------|--|-----------|--------------|--|
| Applicant Information | Applicant Name: | | | | |
| | Address: | | Street: | Town/City: | |
| | | | Province: | Postal Code: | |
| | Phone No.: | | | Email: | |

| | | | | | |
|------------------------------|-----------------|--|-----------|--------------|--|
| Landowner Information | Landowner Name: | | | | |
| | Address: | | Street: | Town/City: | |
| | | | Province: | Postal Code: | |
| | Phone No.: | | | Email: | |

| | | | | | | |
|-----------------------------|--------------------|------|-----------|--------|--------------|-----|
| Property Information | Civic Address: | | Street: | | Town/City: | |
| | | | Province: | | Postal Code: | |
| | Legal Description: | | Lot: | Block: | Plan: | |
| | Part of: | Qtr. | Sec. | Twp. | Rge. | W5M |

| | | | |
|-----------------------------|--------------------------|---|-----------|
| Purpose of Amendment | <input type="checkbox"/> | Municipal Development Plan Amendment | \$840.00 |
| | <input type="checkbox"/> | Area Structure Plan Amendment | \$840.00 |
| | <input type="checkbox"/> | Land Use Bylaw Text Amendment | \$840.00 |
| | <input type="checkbox"/> | Land Use Bylaw Redistricting Amendment | \$840.00 |
| | <input type="checkbox"/> | Land Use Bylaw Amendment to Direct Control District | \$1050.00 |

Description of Proposed Amendment

Reasons in Support of Application for Amendment:

| | | |
|---|---|--|
| Applicant Authorization | 1. I am the owner/agent with the consent and authority of the owner that is the subject matter of this permit application. | |
| | 2. I hereby give my consent to allow any authorized person pursuant to the Municipal Government Act Section 542 the right to enter the land and/or building(s) with respect to this application only. | |
| | 3. I understand this is only an application and does not constitute approval to commence construction. | |
| | 4. I declare that the information contained in this application is correct and true to the best of my knowledge. | |
| | 5. I declare that I will notify the Development Authority of any proposed changes to the plans submitted with this application. | |
| 6. I understand that I may be required to obtain permits pursuant to the Alberta Safety Codes Act and Provincial Authorities. | | |
| 7. I consent to receiving notifications & correspondence regarding this application via email to the address provided on this application. | | |
| 8. By checking the "I agree" box, you agree and authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten Signature. | | |
| <input type="checkbox"/> I agree and authorize. | | |
| Applicant Signature: | Date: | |
| Signature of landowner: (if different from applicant) | Date: | |

This personal information is being collected under the authority of the Municipal Government Act, RSA 2000, Chapter M-26, and will be used for administering the affairs of the Town of Drayton Valley and for the provision of services. This information is protected by the privacy provisions of the Freedom of Information and Protection of Privacy (FOIP) Act, RSA 2000, Chapter F-25. If you have any questions or concerns about the collection and/or use of this information, please contact the FOIP Coordinator at 780-514-2200.

| Development Permit Checklist: | |
|---|--|
| <i>The checklist below must be completed and attached to all Statutory or Land Use Bylaw amendment applications.</i> | |
| <input type="checkbox"/> | Completed application form and the components listed below. |
| <input type="checkbox"/> | Certificate of Title dated within 60 days of date of application. |
| <input type="checkbox"/> | Copies of all instruments (except mortgages) registered by way of caveat on the parcel. |
| <input type="checkbox"/> | Application Fees: See Fee Schedule. |

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|----------------------------|-----------------|
| Application Fees: | Date Paid: |
| | Receipt Number: |
| Deemed Complete Date: | |
| Advertisement/Notice Date: | |
| Report to Council Date: | |
| First Reading Date: | |
| Public Hearing Date: | |
| Second Reading Date: | |
| Third Reading Date: | |