



FOR OFFICE USE ONLY	
Fee Submitted	File Number
Date of Receipt	Receipt #

APPLICATION FOR A DEVELOPMENT PERMIT

Name of Applicant _____ Email _____

Mailing Address _____

_____ Postal Code _____

Telephone (B) _____ (H) _____ Fax _____

For Agents please supply Business/Agency/ Organization Name _____

Registered Owner (if not applicant) _____

Mailing Address _____

_____ Postal Code _____

Telephone (B) _____ (H) _____ Fax _____

1. LEGAL DESCRIPTION OF LAND

- a) All / part of the _____ ¼ Section _____ Township _____ Range _____ West of _____ Meridian
- b) Being all / parts of Lot _____ Block _____ Registered Plan Number _____
- c) Municipal Address _____
- d) Existing Land Use Designation _____ Parcel Size _____ Division _____

2. APPLICATION FOR

3. ADDITIONAL INFORMATION

- a) Is the development within 200 metres of a sour gas line? Yes _____ No _____
- b) Does the site have direct access to a developed Municipal Road? _____

4. REGISTERED OWNER OR PERSON ACTING ON HIS BEHALF

I _____ hereby certify that _____ I am the registered owner
(Full Name in Block Capitals)

_____ I am authorized to act on the owner's behalf

and that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application.

Affix Corporate Seal here if owner is listed as a named or numbered company

Applicant's Signature _____ Owner's Signature _____

Date _____

5. RIGHT OF ENTRY

I hereby authorize Rocky View County to enter the above parcel(s) of land for purposes of investigation and enforcement related to this Development Permit application.

_____ Applicant's/Owner's Signature

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Application: _____

General Location: _____

