



Town of Vegreville

DEVELOPMENT PERMIT - APPLICATION

FOR OFFICE USE ONLY

APPLICATION NO. _____ BUILDING PERMIT or
BUSINESS LICENSE FEE _____ RECEIPT # _____

Permitted Use Discretionary Use

- New Buildings Addition to Buildings Alteration / Minor Development Demolition
- Signage Change of Use / Additional Use Resident Business License (Commercial or Home Occupation)

I/we hereby make application under the provisions of the Town of Vegreville Land Use Bylaw #06-03 for a Development Permit in accordance with the plans and supporting information submitted herewith and which form part of this application.

Applicant _____ Telephone _____

Mailing Address _____ Facsimile _____

Civic Address of Property to be Developed _____

Lot _____ Block _____ Plan _____ Tax Roll # _____

Registered Owner(s) _____ Interest of Applicant if Not Owner _____

Existing Use of Land _____ Land Use District _____

Description of Development _____

Description of Property: Corner Lot OR Interior Lot Length _____ Width _____ Area _____

Yard Setbacks: Front _____ Side A _____ Side B _____ Rear _____ % of Lot Occupied _____

Accessory Building: Detached OR Attached Accessory Building Height _____

Accessory Bldg Setbacks: Front _____ Side A _____ Side B _____ Rear _____ % of Lot Occupied _____

Off-Street Parking Spaces: Qty _____ Size _____ N/A Off-Street Loading Spaces: Qty _____ Size _____ N/A

Estimated Cost of the Project or Contract Price (all construction costs including labour) _____

Estimated Start Date _____ Estimated Completion Date _____

New Constructions: A provision for an external meter reader must be wired near the power meter location during construction. The owner/occupant **MUST** notify the Town prior to occupancy or completion to arrange the installation of a water meter.

I hereby give my consent to allow all authorized persons the right to enter the above land and or building with respect to this application.

Application Date _____ Applicant Signature _____

In accordance with Bylaw #01-05 "Property Tax Incentive for Substantial New Industry and Redevelopment of Existing Businesses" this development meets its minimum qualifying criteria. N/A YES NO

TOWN OF VEGREVILLE

P.O. Box 640
 Vegreville, Alta. T9C 1R7
 Phone: (780) 632-2606
 Fax: (780) 632-3088

The Inspections Group Inc.

12010 – 111 Ave., N.W.,
 Edmonton, Alta. T5G 0E6
 Phone: 1-866-554-5048
 Fax: 1-866-454-5222

BUILDING PERMIT APPLICATION

PERMIT # _____

Please Print All Information Clearly

Date of Application Y/M/D) _____ / _____ / _____

Building Owner: _____	Phone: _____
Address: _____	Postal Code _____
Architect/Designer: _____	Phone: _____
Address: _____	Postal Code _____
Professional Engineer: _____	Phone: _____
Address: _____	Postal Code _____
Contractor: _____	Phone: _____
Address: _____	Postal Code _____
Licensed Interior Designer: _____	Phone: _____
Address: _____	Postal Code _____

Permit Application for (description of the project) _____

Name of Project/Building _____

Address: _____ in the Town of Vegreville Postal Code _____

Legal Survey: Lot _____ Block _____ Plan _____ or Qtr _____ Sec _____ Township _____ Range _____ West of _____ Meridian

Description of intended use or occupancy of the building: _____

I (am) (represent) * the owner of the land and (will be) (represent) * the owner of the building for which I am submitting this permit application. I have read and understand the statements printed on the reverse side of this form. I agree to conform to all applicable laws in this jurisdiction.

Signature _____ Company _____ Phone _____

Address _____ Postal Code _____

For Office Use Only**For Office Use Only**

PLANS & SPECIFICATIONS INCLUDED _____ No. of Sets _____ No. of Drawings per Set _____ Sq. Ft. of Finished area _____ Certified Survey Required: YES ___ NO ___ Enclosed: YES ___ NO ___ TWO SETS OF PLANS AND SPECIFICATIONS AND PAYMENT MUST BE ATTACHED TO THIS PERMIT	Plans Reviewed: _____ Resubmit _____ by Date _____ Permit # Issued _____ Issued By _____ Designation No. _____ Date _____ Comments _____	<i>Project Value \$</i> _____ <i>Permit Fee \$</i> _____ <i>Safety Codes Fee \$</i> _____ <i>3.5% of Permit Fee or \$ 4.00 (whichever is greater)</i> TOTAL FEES \$ _____ Payment Information: Cash Cheque Visa Other _____
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Contact The Inspections Group at the above telephone number for all inspection requests, allowing two business days notice!

The personal information provided as part of this application is collected under Sec. 39 of the Safety Codes Act & Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32.c of the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification & monitoring and property assessment purposes. The name of the permit holder and nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Town of Vegreville at the above address