

OFFICE USE ONLY			
Application Fee: _____	<input type="checkbox"/> DEBIT <input type="checkbox"/> CHQ <input type="checkbox"/> CSH Receipt Number: _____	Date Received: _____	
Land Use District: _____	Division: _____	Tax Roll No.: _____	File Number: _____

**IMPORTANT NOTICE:**

**Any approvals granted regarding this application does not excuse the applicant from complying with the requirements of any Federal, Provincial, or other Municipal Legislation, or the conditions of any easement, restrictive covenant, or agreement affecting the buildings or lands.**

Applicant Information	Landowner Information
Applicant Name: _____ Mailing Address: _____  Phone: _____ Cell: _____ <input type="checkbox"/> I acknowledge that the primary mode of communication will be by email if provided. Email: _____	(If different from Applicant) Registered Owner Name(s): _____  Mailing Address: _____  Phone: _____ Cell: _____  Email: _____

Parcel Information			
LEGAL: <input type="checkbox"/> NE <input type="checkbox"/> NW <input type="checkbox"/> SE <input type="checkbox"/> SW ¼   ½ Section _____ Township _____ Range _____ W4		Municipal Address _____	
LOT _____ BLOCK _____ PLAN _____ TITLE AREA: _____ hectares or _____ acres			
BEST ESTIMATED COST OF PROJECT(S): \$ _____	Project Start Date: _____	Project End Date: _____	<b>Check Your Choice of Safety Codes Provider:</b> Your chosen Provider will be required to be used for the duration of the development and is applicable to all disciplines within Safety Codes. This helps in tracking any future safety codes issues for your development. <input type="checkbox"/> Superior Safety Codes Inc. <input type="checkbox"/> The Inspections Group Inc.

Development Details		
<b>Proposed Development:</b> <input type="checkbox"/> New <input type="checkbox"/> *Existing <input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential <input type="checkbox"/> Other (please specify): _____		
<b>NUMBER OF PARCELS PROPOSED:</b> _____	<b>PD-011 CHECKLIST INCLUDED:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>TYPE OF SEWAGE SYSTEM</b> (existing or proposed): <input type="checkbox"/> Septic Field <input type="checkbox"/> Holding Tank <input type="checkbox"/> Open Discharge <input type="checkbox"/> Other (please describe): _____
<b>REASON FOR DEVELOPMENT OUTLINE PLAN:</b>  _____		<b>TYPE OF WATER SUPPLY</b> (existing or proposed) : <input type="checkbox"/> Well <input type="checkbox"/> Cistern <input type="checkbox"/> Common <input type="checkbox"/> Other (please describe): _____
		<b>Within 1 mile of the proposed development:</b> <b>GAS Facilities/Pipelines:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown Distance: _____ <b>CONFINED FEEDING Operations:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown Distance: _____

### Authorization

- I / We, the Applicant and/or registered owner/s certify and understand that:**
- The information given is complete and is, to the best of my/our knowledge, a true statement of the facts relating to the application for development approval and that no further progress will occur on the development until a decision on the permit has been rendered\*. Any material falsehood or any omission of a material fact made by the applicant/owner with respect to this application may result in an issued permit becoming null and void.
  - I authorize the staff of the County of Vermilion River and other agencies as designated in Section 542 of the *Municipal Government Act*, R.S.A. 2000, to enter my land for the purpose of conducting a site inspections in connection with my development permit application;
  - Where applicable, the individual(s) whose information has been listed under "Applicant" on this application is hereby authorized to make this application on my/our behalf. (In the case of a registered company, documentation of those with signing authority under company seal is required in addition to this form.)
  - Any fees incurred by the County for review by the County's consulting engineers will be charged back to the applicant as per the County's Fee Bylaw.

Applicant Signature	Registered Owner Signature	Registered Owner Signature
Print Name	Print Name	Print Name

The personal information requested on this form is being collected by the County of Vermilion River for purposes provided under Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and is protected by the FOIP Act. If you have any questions about this collection, contact the County Administrator at (780)846-2244 or (780)853-5492  
 \*All development and construction that occurs prior to permit issuance may be subject to penalty fees. A Stop Order may also be issued.