

TOWN OF FORT MACLEOD RESIDENTIAL DEVELOPMENT PERMIT APPLICATION

FOR OFFICE USE ONLY
Date Received:
Accepted By:
Date Deemed Complete:
Application No. (if applicable):
Roll No.:
Fee:

Date of Application:

IMPORTANT NOTICE: This application **does not** permit you to commence construction until such time as a permit has been issued by the Development Authority. If approval has not been received within 40 days of the date the application is deemed complete, you have the right to file an appeal to the Subdivision and Development Appeal Board.

THIS DOES NOT CONSTITUTE A BUILDING PERMIT. A SEPARATE BUILDING PERMIT MUST BE OBTAINED BEFORE CONSTRUCTION BEGINS.

APPLICANT INFORMATION

Name of Applicant (please print):	Phone (primary): Phone (alternate): Fax: Email: Check this box if you would like to receive documents through email.
Is the applicant the owner of the property?	Yes IF "NO" please complete box below
Name of Owner:	Phone:
Mailing Address:	Applicant's interest in the property:
	□ Agent
	Contractor
City:	Tenant
	□ Other
Postal Code:	

PROPERTY INFORMATION

Civic Address:				
Legal Description:	Lot(s)	Block	Plan	
Land Use District:				
What is the existing use?				

DEVELOPMENT INFORMATION

This ap	plication is to:	(Check all that apply)	
	Construct a n	ew dwelling	
	The dwellir	ng is a:	
		Single-unit dwelling	
		2-unit dwelling	
		Multi-unit – please specify the number of dwelling units	
		Other	
	Alter/renovat	te the existing building	
	The renova	ation is a:	
		Addition	
		Deck(s)	
		Other	
Construct an accessory building / structure			
	The access	ory building is a:	
		Garage (detached)	
		Shed/workshop	
		Other	
	Moved-in dw	elling	
	Demolish exis	sting building (attach completed Demolition Form)	
	Other		

Describe the proposed use, any changes from existing use, and any work to be done.

BUILDING REQUIREMENTS

	Principal Building	Accessory Building	Office Use
Parcel Size	🗖 m² 🗖 ft²	🗖 m² 🗖 ft²	
Building Size	\square m ² \square ft ²	🗖 m² 🗖 ft²	
Height of Building	🛛 m 🖵 ft.	🗖 m 🗖 ft.	
Proposed Setbacks from Prope	rty Lines	-	
Front	🛛 m 🖵 ft	🛛 m 🖵 ft	
Rear	🛛 m 🖵 ft	🛛 m 🖵 ft	
Side	🗖 m 🗖 ft	🛛 m 🖵 ft	
Side	🛛 m 🖵 ft	🛛 m 🖵 ft	
Parcel Type:	Interior Lot	Corner Lot	

DECLARATION OF APPLICANT/AGENT

The information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts in relation to the application for a Development Permit. I also consent to an authorized person designated by the municipality to enter upon the subject land and buildings for the purpose of an inspection during the processing of this application.

IMPORTANT: This personal information is being collected under the authority of the Town of Fort Macleod for development. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. For more information contact the Town of Fort Macleod FOIP Coordinator at 403-553-4425.

APPLICANT

Registered Owner (if not the same as applicant)

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DEVELOPMENT APPLICATION SUBMISSION REQUIREMENTS

The following items shall be attached to all Development Permit Applications for new buildings or exterior changes to existing buildings. This is not an exhaustive list and the Designated Officer may request additional information that is required to assess the application.

Copy of Site Plan. Site plan shall provide the following information: (May be provided on a survey plan or sketch)

- □ Legal description and municipal address of subject property
- □ Scale and north arrow
- Adjacent roadways & lanes
- Lot dimensions, lot area, and percentage of lot coverage for all structures
- **L** Existing residence and/or any other buildings with dimensions of foundation and projections including decks
- Proposed residence and/or any other buildings with dimensions of foundation and projections including decks
- □ The proposed distances from the foundation of the building to the front, side, and rear property lines
- Location of lot access, existing sidewalk(s) and curbs
- Location of any registered utility right of ways or easements
- Location and number of off-street parking spaces
- Location of any abandoned wells
- **Copy of Building Plans.** Plans shall be to scale and contain the following information:
 - □ Scale and dimensions of exterior walls and interior rooms
 - □ Floor plan of all living space proposed to be developed
 - Building elevations including front, sides, and rear elevations, building height (from finished grade), roofing material, and roof pitch
- □ **If applicant is not the registered owner**, a written statement (or this application) signed by the registered owner consenting to this application.
- **Abandoned well information** (see attached information).
- **Application fee payable to the Town of Fort Macleod.**





Roll No._____Zoning: _____



SITE PLAN GRID

