



DEVELOPMENT PERMIT APPLICATION

Phone: 780-349-3346 Fax: 780-349-2012

10366-106 Street, Westlock Alberta T7P 2G1

www.westlockcounty.com

Please read the attached instruction guidelines before completing this form. An application will only be processed if submitted in complete form and accompanied by the applicable fee.

Development Permit No _____
Tax Roll No _____
Application Date _____

Applicant Contact Information (Type or Print)	Property Owner Contact Information (if different from Applicant)
Name: _____	Name: _____
Mailing Address: _____	Mailing Address: _____
Town/City: _____ Prov: _____	Town/City: _____ Prov: _____
Postal Code: _____ Cell: _____	Postal Code: _____ Cell: _____
Daytime Ph: _____ Fax: _____	Daytime Ph: _____ Fax: _____
Email: _____	Email: _____

Qtr	Sec	Twp	Rg	W4	Lot	Block	Plan
Rural Address					Property Dimensions/Acres: _____		Hamlet/Community
Current Use of Land or Buildings					Proposed Use of Land or Buildings _____		
The land is adjacent to: <input type="checkbox"/> A Primary Highway _____ <input type="checkbox"/> A Secondary Highway _____ <input type="checkbox"/> A Municipal Road _____							

Type of Development Proposed: Residential Recreational Commercial Industrial Agricultural

Dwelling Size: _____ <input type="checkbox"/> 1 Storey <input type="checkbox"/> 2 Storey Ht _____ <input type="checkbox"/> On-Site Construction <input type="checkbox"/> Modular Home <input type="checkbox"/> Manufactured Home Year: _____ # of Dwellings on the Property _____	Accessory Building _____ x _____ <input type="checkbox"/> 1 Storey <input type="checkbox"/> 2 Storey Ht _____ <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Shed <input type="checkbox"/> Shop Building <input type="checkbox"/> Deck Covered Other _____ _____ _____	<input type="checkbox"/> Minor Home Occupation <input type="checkbox"/> Major Home Occupation <input type="checkbox"/> Natural Resource Extraction <input type="checkbox"/> Other (Specify) _____ _____ <input type="checkbox"/> Variance Request - _____ Details: _____ _____ _____
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Building Drawings Submitted Site Plan Submitted Estimated Value of Development: \$ _____

Construction Start Date: _____ Completion Date: _____

I/We hereby declare that the above information is, to the best of my/our knowledge, factual and correct and hereby give my/our consent to allow all authorized persons the right to enter the above land and/or buildings for the purpose of investigation and enforcement related to this development.

Signature of Applicant(s) _____ / _____

Signature of Owners(s) _____ / _____

Personal Information required on this application form is collected under the authority of sections 33(a) and (c) of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act (the "FOIP Act"). Your personal information will be used to process your application. Please be advised that your name, address and details related to your permit will be disclosed to the Alberta Safety Codes Authority for the purpose of compliance with the Safety Codes Act. Disclosure of your personal information is completed under the authority of section 40(1)(c) of the FOIP Act.

FOR OFFICE USE ONLY		
Decision & Dates	Zoning	Fees
<input type="checkbox"/> Approved <input type="checkbox"/> With conditions <input type="checkbox"/> Refused <input type="checkbox"/> Appealed <input type="checkbox"/> Decision Date: _____	<input type="checkbox"/> District _____ <input type="checkbox"/> Permitted Use <input type="checkbox"/> Discretionary Use <input type="checkbox"/> Variance	<input type="checkbox"/> Fee: _____ <input type="checkbox"/> Date Paid: _____ <input type="checkbox"/> Payment Type Cash__ Debit__ MC__ Visa__ Cheque__ Receipt Number: _____