

RETURN COMPLETED APPLICATION FORM TO:



Infrastructure, Planning & Development Department  
 4829 50 Street, Lower Level  
 Postal Drawer 640  
 VEGREVILLE, ALBERTA T9C 1R7

T: 780-632-6479 | F: 780-632-6856  
 ipd@vegreville.com | www.vegreville.com

Schedule Form 1 Subdivision and Development Regulation (section4)

<b>APPLICATION FOR SUBDIVISION APPROVAL</b>	<b>For Office Use Only</b>	
	Date of receipt of Form A as complete	File No.
	Fees Submitted:	

**THIS FORM IS TO BE COMPLETED IN FULL WHEREVER APPLICABLE BY THE REGISTERED OWNER OF THE LAND THAT IS THE SUBJECT OF THE APPLICATION OR BY A PERSON AUTHORIZED TO ACT THE REGISTERED OWNERS BEHALF**

1. Names(s) of registered owner(s) of land to be subdivided Address and Phone No.

\_\_\_\_\_

(Please print name)

\_\_\_\_\_

2. Authorized person(s) acting on behalf of registered owner(s) Address and Phone No.

\_\_\_\_\_

\_\_\_\_\_

3. **LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED (ie: existing titled area)**

All/part of the \_\_\_\_\_ 1/4 Section \_\_\_\_\_ twp. \_\_\_\_\_ range \_\_\_\_\_ West of the 4th meridian

Being all/part of lot \_\_\_\_\_ block \_\_\_\_\_ Reg. Plan No. \_\_\_\_\_ Certificate of Title No. \_\_\_\_\_

Area of above-described parcel of land to be subdivided (ie: existing titled area) \_\_\_\_\_

4. **LOCATION OF LAND TO BE SUBDIVIDED**

a. Is the land situated immediately adjacent to the municipal boundary? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes", the adjoining municipality is \_\_\_\_\_

b. Is the land adjacent to Highway No. 16 or Secondary Highway 857? Yes \_\_\_\_\_ No \_\_\_\_\_

c. Is the land adjacent to a river, watercourse, lake or other body of water, or by a canal or drainage ditch

Yes \_\_\_\_\_ No \_\_\_\_\_ If "Yes" state it's name \_\_\_\_\_

5. **EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED**

a. Existing use of land \_\_\_\_\_

b. Proposed use of land (**PLEASE COMPLETE REVERSE SIDE OF THIS FORM**) \_\_\_\_\_

c. The designated use ("zone") of the land as classified under the Land Use Bylaw \_\_\_\_\_

6. **PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED**

a. Describe the nature of the topography of the land (e.g. flat, rolling, steep, mixed, etc.) \_\_\_\_\_

b. Describe the nature of the vegetation and water on the land (e.g. brush, tree stands - Sloughs, Creeks Etc.) \_\_\_\_\_

c. Describe the kind of soil on the land (e.g. sandy, loam, clay, etc.) \_\_\_\_\_

7. **EXISTING BUILDINGS ON THE LAND PROPOSED TO BE SUBDIVIDED**

Describe any buildings, historical or otherwise, and any structures on the land and whether they are to be demolished or moved. \_\_\_\_\_

8. **REGISTERED OWNER OR PERSON ACTING ON HIS/HER BEHALF**

I (we) \_\_\_\_\_ hereby certify that

(Please print name)

I/we am the registered owner

I am the agent authorised to act on behalf of the registered owner

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 for subdivision.

Address \_\_\_\_\_ (signed) \_\_\_\_\_

Phone No. \_\_\_\_\_ Date \_\_\_\_\_