

Subdivision Application Form

FOR OFFICE USE ONLY			
Date Application is Accepted as Complete		File Number	
Fees Submitted		Receipt Number	

OWNER AND APPLICANT INFORMATION

Name of Registered Owner		Phone and Fax#			
		Email Address:			
Address		Town / City		Postal Code	
Name of Applicant		Phone #			
Address		Town / City		Postal Code	

LEGAL LAND DESCRIPTION

Qtr / LSD	Sec.	Twp.	Rge.	Meridian	Lot:	
				W 4 th M	Block:	
					Plan:	
MUNICIPALITY:						

PHYSICAL CHARACTERISTICS OF THE LAND

Topography	<input type="checkbox"/> flat <input type="checkbox"/> rolling <input type="checkbox"/> steep <input type="checkbox"/> mixed Other:	Vegetation	<input type="checkbox"/> brush <input type="checkbox"/> shelterbelt <input type="checkbox"/> crop <input type="checkbox"/> native grass Other:
Soil	<input type="checkbox"/> sand <input type="checkbox"/> loam <input type="checkbox"/> clay Other:	Water	<input type="checkbox"/> slough <input type="checkbox"/> creek <input type="checkbox"/> lake <input type="checkbox"/> river Other:

LAND USE

Existing Use of Land	<input type="checkbox"/> Agriculture <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Recreational Other:		
Proposed Use of Land	<input type="checkbox"/> Agriculture <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Recreational Other:		
Land Use Designation		No. of Proposed Lots	

LOCATION OF LAND TO BE SUBDIVIDED

Is the land located adjacent to the municipal boundary?	<input type="checkbox"/> no <input type="checkbox"/> yes	Municipality	
Is the land located within 800 m (1/2 mile) of a river, stream, watercourse, lake or other permanent body of water, a canal or drainage ditch?	<input type="checkbox"/> no <input type="checkbox"/> yes	Name of water body	
Is the land located within 800 m (1/2 mile) of the right-of-way of a provincial highway?	<input type="checkbox"/> no <input type="checkbox"/> yes	Highway Number	
Is the land located within 800 m (1/2 mile) of a Confined Feeding Operation?	<input type="checkbox"/> no <input type="checkbox"/> yes	Location	
Is the land located within 450 m (1500 ft) of a landfill for the disposal of garbage?	<input type="checkbox"/> no <input type="checkbox"/> yes	Location	
Is the land located within 450 m (1500 ft) of a sewage treatment facility or sewage lagoon?	<input type="checkbox"/> no <input type="checkbox"/> yes	Location	
Is the land located within 1600 m (1 mile) of a sour gas facility?	<input type="checkbox"/> no <input type="checkbox"/> yes	Location	

EXISTING BUILDINGS

Describe all buildings and any structures on the land and whether they are to be demolished or removed	<input type="checkbox"/> residence <input type="checkbox"/> garage <input type="checkbox"/> shop <input type="checkbox"/> quonset <input type="checkbox"/> grain bins <input type="checkbox"/> shelterbelt <input type="checkbox"/> other – please describe

Mail or deliver the completed application form, detailed sketch and required fee to:

115 Palliser Trail, P.O. Drawer 1900, Hanna, Alberta T0J 1P0
 tel 403-854-3371 fax 403-854-4684 toll free 1-877-854-3371
 www.palliserservices.ca

WATER AND SEWER SERVICES

Type of Water Supply currently used	<input type="checkbox"/> dugout	<input type="checkbox"/> well	<input type="checkbox"/> municipal service	<input type="checkbox"/> cistern and hauling	
	<input type="checkbox"/> other – please describe				
Type of Water Supply proposed	<input type="checkbox"/> dugout	<input type="checkbox"/> well	<input type="checkbox"/> municipal service	<input type="checkbox"/> cistern and hauling	
	<input type="checkbox"/> other – please describe				
Type of Sewage Disposal currently used	<input type="checkbox"/> open discharge	<input type="checkbox"/> tile field	<input type="checkbox"/> municipal service	<input type="checkbox"/> sewage lagoon	<input type="checkbox"/> holding tank
	<input type="checkbox"/> other – please describe				
Type of Sewage Disposal proposed	<input type="checkbox"/> open discharge	<input type="checkbox"/> tile field	<input type="checkbox"/> municipal service	<input type="checkbox"/> sewage lagoon	<input type="checkbox"/> holding tank
	<input type="checkbox"/> other – please describe				

PURPOSE OF THE PROPOSED SUBDIVISION (Attach a detailed sketch)

In the space below please provide a detailed summary of the purpose of your subdivision application. Then attach a detailed sketch that **must show the location, dimensions, and boundaries of the proposed subdivision** in relation to the existing title. The sketch should also **show all buildings, structures and other improvements on the land**, and indicate if they are to remain or to be demolished; the location of any existing sewage disposal systems on the land, the location of any wells, and the location of other features such as shelter belts, railways, creeks or other water bodies, low land, other significant natural features, and any rights of way.

THE FOLLOWING SHOULD ACCOMPANY THIS APPLICATION

1. A photocopy of the title for the property.
2. A non-refundable **application fee** made **payable to Palliser Regional Municipal Services**

REGISTERED OWNER OR PERSON ACTING ON THE REGISTERED OWNER'S BEHALF

I _____ hereby certify that I am the registered owner, or
 (Print Full Name) I am the agent authorized 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 _____

RIGHT OF ENTRY

I hereby authorize representatives of Palliser Regional Municipal Services and referral agencies to enter my land for the purpose of conducting a site inspection with respect to my subdivision application.

This right is granted pursuant to Section 653(2) of the Municipal Government Act.

Registered Owner's Signature

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