Zoning Bylaw Amendment Application

Applicant Information		Bylaw No.			
Name of Applicant:					
Mailing Address:		Durvinge		Desited On the	
Street Name Phone No.:	City	Province Emai		Postal Code	
Registered Owner (If diffe	erent from above):				
Name:					
Mailing Address:					
	Unit #	Street Name		Province	Postal Code
Phone Number:		Emai	l:		
Subject Property:					
	Unit #	Street Name			
	Lot(s)	Block/Parc	el	Plan	
The application fee (\$500 + a review and processing can t The application and any re person at the Community	ake 6 to 8 weeks fror	n date of applica on can be subm i	tion if all re tted to <u>so</u>	equired information is sub Iutions@citypa.com or	mitted. by mail or in
Amount Paid:	unt Paid: Date Paid:			Receipt No.:	
Declaration of Applicant I hereby certify that all the declaration conscientious under oath, and by virtue I agree to comply with the	e above statements ly believing it to be of <i>The Canadian E</i>	true, and know Evidence Act.	ing that it	is of the same force a	nd effect as if made
Signature of Owner or Authorized Agent:				Date:	
The City of Prince Albert is committed to and Protection of Privacy Act (LAFOIP) without your express consent pursuant email cityclerk@citypa.com or call 306-9	and will only be used for the to LAFOIP and the City of Pri	purpose for which it was nce Albert's policies. Pl	collected. Per ease contact T	sonal information will not be shared he City Clerk's Office, 1084 Central	or used for any other purpose
This application has been	approved this	day of			, 20
Development Officer:			Council	Date & Resolution:	
Prince Albert					