

## SUBDIVISION APPLICATION FORM

Community Growth & Investment Town of Okotoks, Box 20 (5 Elizabeth St.), Okotoks AB, T1S 1K1 planning@okotoks.ca Phone: 403.995.2760 Fax: 403.938.7387

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

1.	REGISTERED OWNER OF LAND TO BE SUBDIVIDED  Name:		
	Mailing Address:		
	Phone: Fax: Email:		
2.	PERSON AUTHORIZED TO ACT ON BEHALF OF REGISTERED OWNER (IF ANY) Name:		
	Mailing Address:		
	Phone: Fax: Email:		
3.	LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED		
	All/part of the 1/4 sec twp range west of meridian		
	Being all/part of Lot Block Reg. Plan No C.O.T. No		
	Area of the above parcel of land to be subdivided hectares acres		
	Municipal Address(s) (if applicable)		
	boundary?  c. Is the land situated within 1.6 kilometres of the centre line of a highway right of way?  d. Does the proposed parcel contain or is it adjacent to a river, stream, lake or other body of water or by a drainage ditch or canal?  e. Is the proposed parcel within 1.5 kilometres of a sour gas facility?  Yes No  If "yes", the highway is No  No  If "yes", state its name  Yes No		
5.	EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED		
	a. Existing use of the land		
	b. Proposed use of the land		
	c. The designated use of the land as classified under the land use bylaw		
6.	PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED (WHERE APPROPRIATE)		
	<ul> <li>a. Describe the nature of the topography of the land (flat, rolling, steep, mixed)</li> <li>b. Describe the nature of the vegetation and water on the land (brush, shrubs, tree stands, woodlots, etc., sloughs, creeks, etc.)</li> </ul>		
	c. Describe the kind of soil on the land (sandy, loam, clay, etc.)		

7.	EXISTING BUILDINGS ON THE LAND PROPOSED TO BE SUBDIVIDED  Describe any buildings and any structures on the land and whether they are to be demolished or moved	
8.	WATER AND SEWER SERVICES If the proposed subdivision is to be served by other than a water distribution system and a wastewater collection system, describe the manner of providing water and sewage disposal.	
9.	REGISTERED OWNER OR PERSON ACTING ON THE REGISTERED OWNER'S BEHALF	
	I hereby certify that (Full name)	
	☐ I am the registered owner, or ☐ 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.	
	Signed Date	
10.	RIGHT OF ENTRY  I (Full name) consent to the Town of Okotoks and their Agents entering the subject land for the purpose of conducting a site inspection at a reasonable time in connection with this application for subdivision approval.	
	Signed Date	
11.	ACCEPTANCE OF REQUIREMENT TO PAY ADDITIONAL FEES  I  (Full name)  consent to paying for any additional fees that may be incurred by the Town of Okotoks as a result of the review of this application, including but not limited to: consultant fees, legal fees or other disbursements. Payment must be received within thirty (30) days of the Town of Okotoks providing a copy of any relevant invoice to the registered owner of the property. Should payment not be received within thirty (30) days, the registered owner agrees that the Town of Okotoks may apply the balance owing to the tax account for the property.  Signed  Date	
The personal information on this application is collected under the authority of the Alberta Municipal Government Act, the Freedom of Information and Protection of Privacy Act (FOIP), and the Okotoks Land Use Bylaw 17-21. It will be used to communicate with the applicant during the application review & site inspection processes. As part of the review process, it will be circulated as needed to relevant Town Business Services, Provincial & Federal Agencies, Utility Companies and adjacent landowners. It may also be submitted to the Okotoks Municipal Planning Commission (MPC) and/or the Subdivision and Development Appeal Board (SDAB). Correspondence received may be included in public meeting agendas. The applicant's name and the nature of the permit will be publicly available, in accordance with the FOIP Act. Should you have any questions or concerns regarding the collection of this information, please contact the FOIP Coordinator at foip@okotoks.ca or 403-938-8944.		
	For Office Use Only	
	File # Fee Receipt #	

Revised: November 2021