

## **CITY OF CAMROSE**

amrose	5	5204 - 50 AVE.		(780) 672-4	428
		E, AB T4V 0S8		planning@	camrose.ca
CAMROSE A	ΡΡΙ ΙΔΑΤ	ION		FOR OFFIC	AL USE ONLY
FOR SUBDIV	_	1011	Fees Submitt	ted:	Receipt #:
☐ By plan		on	FILE No.:		DATE Subdivision Application
☐ By other			SUB		accepted as complete:
ORM IS TO BE COMPL THE SUBJECT OF TH	E APPLICATION		THORIZED PE	RSON ACTING	
Name of the registered	owner of land t	o be subdivided	Address,	Phone Numbe	r and Email
			Address:		
_			Phone:		
			Email:		
Authorized person actin	g on behalf of	registered owner	Address,	Phone Numbe	r and Email
			Address:		
			Phone:		
			Email:		
	<i>application a do</i> mission letter a		he registered o	owner naming a	person to act on behalf of the
LEGAL DESCRIPTION	AND AREA C	F LAND TO BE SU	IBDIVIDED		
All/part of the	Sec	Twp	Range	West of	Meridian
OR	Being all/par	ts of Lot	Block	Reg. Plan N	lo
OR	Municipal Ad	dress (if assigned)			
Certificate of Title Numb	oer:				
Total area of the above	parcel of land	to two decimal place	es(in hectares)	:	
Area of the above parce	el of land to be	subdivided (in hecta	ares):		
Intent of Subdivision ap	plication:				

The information that is being collected in this application is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy Act, and as such, is protected by the Provisions of this Act. If you have any questions, contact the FOIP Coordinator at (780) 678-3027.

	b.	Is the land situated immediately adjacent to the municipal boundary? $\ \square$ Yes $\ \square$ No							
		If yes, the adjoining municipality is							
	C.	Is the land situated within 1.6 kilometers of the center line of a Provincial Highway AND 1.6 kilometers of the boundary between the City and the County?   Yes  No							
		If yes, the Highway is No The secondary road is No							
	d.	Is the land situated within 800 meters of a river, stream, watercourse, lake or other permanent body of water, or a canal or drainage ditch? $\square$ Yes $\square$ No							
		If yes, state its name:							
	e.	Is any part of the land to be subdivided located within the floodway or flood fringe (1:100 year flood) area?							
		☐ Yes ☐ No							
	f.	Is any part of the area to be subdivided on or in close proximity to historical mine location?							
		☐ Yes – please attach map ☐ No							
	g.	Is there an abandoned well within the area to be subdivided?							
		If yes, the location is							
5.	LOT	SIZES AND MUNICIPAL RESERVE ALLOCATION							
	a.	Total number of lots created:							
	b.	Range of size of lots being created (square meters or hectares) whichever is appropriate:							
	С	Proposed disposition/dedication of Municipal Reserve (MR):							
	parce	nost subdivisions in the "General Urban" area as classified in the Municipal Development Plan, 10% of the total el  is required for MR. No MR is required in previously developed areas unless a Deferred Reserve Caveat has registered or some other agreement indicates that Municipal Reserves are required.							
		(i) If dedicated, total area of MR:% or hectares or							
		(ii) Deferral% or hectares or							
		(iii) Deferral to balance% or hectares or							
		(iv) If cash-in-lieu, appraised current market value ().							
		City of Camrose is the final approval authority with respect to any decision regarding the disposition/dedication of cipal Reserves.							
6.	EXIS	TING AND PROPOSED USE OF LAND TO BE SUBDIVIDED							
a. Describe all existing uses on the entire parcel:									
	b	Describe all proposed uses of the area to be subdivided:							
	C.	The designated use of the land as classified under the Land Use Bylaw (zone):							
	d.	The proposed use of the land if different than above (zone):							
		: if the current and proposed land use districts do not coincide, a redistricting application will be required. please provide redistricting map in PDF and AutoCad.							

The information that is being collected in this application is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy Act, and as such, is protected by the Provisions of this Act. If you have any questions, contact the FOIP Coordinator at (780) 678-3027.

7.	PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED									
	a.	Describe the nature of the topography of the land:								
		☐ Flat	Rolling	☐ Steep		☐ Mixed				
	b.	b. Describe the nature of the vegetation and water on the land:  ☐ Brush ☐ Shrubs ☐ Tree stands ☐ Woodlots ☐ Other								
		Sloughs	☐ Creeks	☐ Other						
	c.	Describe the	type of soil on t	the land:						
		☐ Sandy	Loam	☐ Clay		Other				
8.	EX	EXISTING BUILDINGS ON THE LAND PROPOSED TO BE SUBDIVIDED								
	a.	a. Describe any buildings, historical or otherwise, and any structures on the entire parcel of land.								
	b. Will any of these buildings be demolished or moved?									
	арр		ing developme	nt/building c	conditio	red for any structuns may be required in thereof.				
9.		INDICATE IF THE SUBJECT LAND IS SITUATED IN PROXIMITY TO LAND WHICH IS USED OR IS AUTHORIZED FOR USE AS:								
	If y	es, please includ	de a map indica	ating the loca	ation of	the land that requ	uires a se	tback as	outlined b	elow.
	a.	A. A landfill for the disposal of garbage and refuse (450m) (both active and decommissioned) Yes \( \subseteq \text{No} \subseteq \text{Map}						□ Мар		
	b.	A sewage treatment plant or sewage lagoon (300m) (both decommissioned)				00m) (both active	and	☐ Yes	s 🗌 No	□ Мар
	C.		-		lot, pigg	gery, etc.) (300m)		☐ Yes	s 🗌 No	□ Мар
	d.	An active rail	line (30 meters	;)				☐ Yes	s 🗌 No	□ Мар
10.	RE:	REGISTERED OWNER OR PERSON ACTING ON THEIR BEHALF  I,, hereby certify that								
	and	I am  The registered owner  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 statemen of the facts relating to this application for subdivision approval.								
		Print Name:								
		Signature:					Date:			
11.	RIG	HT OF ENTRY								
	con		application for			ubject land(s) for t val. This right is g				
		Signature:				D	ate:			

The information that is being collected in this application is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy Act, and as such, is protected by the Provisions of this Act. If you have any questions, contact the FOIP Coordinator at (780) 678-3027.

12.	FREEDOM OF INFORMATION

I understand that this application and accompanying information is public record that it is accessible by the public. This application will be made available for viewing upon request at the City Office. This personal information is being collected under the authority of the Municipal Government Act and will be used only for the purposes for which it is being collected.

Signature:

Date:

THE SUBDIVISION AUTHORITY MAY REQUIRE ADDITIONAL INFORMATION AT THEIR DISCRETION.