



LUMSDEN, IN THE QU'APPELLE

TOWN OF LUMSDEN

Development Application Form

1. Owner/Applicant:

Name: _____
Address: _____
City/Prov: _____ Postal Code: _____
Telephone: _____ (Home)
_____ (Work)

2. Contractor:

Name: _____
Address: _____
City/Prov: _____ Postal Code: _____
Telephone: _____ (Home)
_____ (Work)

3. Designer:

Name: _____
Address: _____
City/Prov: _____ Postal Code: _____
Telephone: _____ (Home)
_____ (Work)

4. Surveyor:

Name: _____
Address: _____
City/Prov: _____ Postal Code: _____
Telephone: _____ (Home)
_____ (Work)

5. Legal description of land for development:

Lot: _____ Block: _____ Plan #: _____
Civic Address: _____

6. Area of the site proposed for development:

Lot Size: _____ ft.2 OR _____ m2
Buildings: 1. Description _____ Size _____ (ft.2/m2)
2. Description _____ Size _____ (ft.2/m2)
3. Description _____ Size _____ (ft.2/m2)

7. (a) Type of Proposed Development Work:

(b) Intended Use of Development:

8. Description of Proposed Development (describe or explain briefly):

Land clearing proposed: _____
Excavation/Fill proposed: _____
Leveling/Grading: _____
Landscaping: _____
Drainage: _____

9. Source of Water Supply:

Municipal/Other _____

10. Sewage Disposal:

Municipal/Other _____
Distance From Water Source _____ Distance From Dwelling _____ (Specify ft. or m)

11. Estimated cost of building (excluding site):

Construction Cost \$ _____

12. Other Comments or Information to Attach:

I SOLEMNLY DECLARE THAT ALL THE ABOVE STATEMENTS CONTAINED WITHIN THIS APPLICATION ARE TRUE, AND I MAKE THIS DECLARATION CONSCIENTIOUSLY BELIEVING IT TO BE TRUE AND KNOWING THAT IT IS OF THE SAME FORCE AND EFFECT AS IF MADE UNDER OATH AND BY VIRTUE OF "THE CANADA EVIDENCE ACT".

Signature of Owner/Applicant: _____ Date of Application: _____

I HAVE NO OBJECTION TO THE ENTRY UPON THE LAND DESCRIBED HEREIN BY THE PERSON(S) BY THE TOWN OF LUMSDEN FOR THE PURPOSE OF SITE INSPECTIONS REQUIRED FOR REVIEWING THIS APPLICATION.

Signature of Owner/Applicant: _____

OFFICE USE:

DATE RECEIVED: _____ APPLICATION NO.: _____ DATE REVIEWED: _____

SITE PLAN

