



Rezoning Application

Existing Zoning: _____ Proposed Zoning: _____

<p>Amendment Type:</p> <p>Rezoning Only</p> <p>OCP Redesignation Only</p> <p>Text Amendment Only</p> <p>Rezoning & OCP Redesignation</p> <p>Rezoning & Text Amendment</p> <p>Other (specify): _____</p>
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Applicant(s)

Name: _____

Address: _____

Phone: _____ Email: _____

Owner(s) of Property

Name: _____

Address: _____

Phone: _____ Email: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Property Information (Civic address of properties to which this Rezoning will be applicable to)

Property Address(es): _____

Purpose of Application

Details & Fees (to be paid at time of application, please check all applicable)

	Quantity	Fees	Residential	Proposed Units	Property Size (Ha)
Site Profile			1 or 2 Family Dwelling		
OCP Amendment			Townhouse		
Text Amendment Only			Apartment		
Rezoning Only			Other	Bldg Size (m ²)	Site Size (m ²)
Total Fees:			Commercial		
			Industrial		
			Institutional		

Applicant Acknowledgement

Any personal information that is collected on this form will be managed in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have any questions or concerns regarding the collection, use, disclosure or safeguarding of personal information associated with this form, please direct enquiries to the Corporate Services department at (604)793-2986.

I/We have attached to this application the required documents and hereby agree to submit further information and/or fees deemed necessary for processing this application.

_____ _____ _____
 Applicant or Authorized Representative Name (Print) Signature Date

Authorization of Applicant

I hereby designate _____ to act as my agent in matters related to this application.

Owner's Name(s) (Print): _____ Owners Signature(s): _____

Owner's Name(s) (Print): _____ Owners Signature(s): _____