



Subdivision Application

Subdivision Type:

- | | | |
|--|--|---|
| <input type="checkbox"/> Fee Simple | <input type="checkbox"/> Bare Land Strata | <input type="checkbox"/> Homesite Severance |
| <input type="checkbox"/> Consolidation | <input type="checkbox"/> Common Strata | <input type="checkbox"/> Other |
| <input type="checkbox"/> Strata Conversion | <input type="checkbox"/> Boundary Adjustment | |

Applicant(s)

Name: _____

Address: _____

Phone: _____ Email: _____

Owner(s) of Property

Name: _____

Address: _____

Phone: _____ Email: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Property Information

Property Address(es): _____

Existing buildings/structures will be: Retained Demolished Relocated No existing buildings

Purpose of Application (describe the proposed subdivision)


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

	Quantity		Quantity
<input type="checkbox"/> Fee Simple (# of lots to be created)		<input type="checkbox"/> Site Profile	
<input type="checkbox"/> Bare land Strata (# of lots to be created)		<input type="checkbox"/> Conversion (# of units)	
<input type="checkbox"/> Common Strata (# of units)		<input type="checkbox"/> Boundary Adjustment	
<input type="checkbox"/> Strata Conversion (# of units)		<input type="checkbox"/> Homesite Severance	

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. Should there be a change of registered owner(s) or authorized agent(s) please notify the Land Development Department in writing immediately, to avoid any unnecessary delay in processing the application.

_____	_____		_____
Full Name of Applicant (Print)	Signature		Date
_____	_____		_____
Full Name of Applicant (Print)	Signature		Date

Owner's Authorization and Acknowledgement

This application is made with my/our full knowledge and consent. I/we designate the above noted applicant(s) to act as my/our agent(s) in all matters related to this application.

_____	_____		_____
Full Name of Primary Owner (Print)	Signature		Date
_____	_____		_____
Full Name of Additional Owner (Print)	Signature		Date
_____	_____		_____
Full Name of Additional Owner (Print)	Signature		Date
_____	_____		_____
Full Name of Additional Owner (Print)	Signature		Date

*** Please note all registered owners must sign***