

FORM A

TOWN OF LA RONGE

DEVELOPMENT PERMIT APPLICATION

PROJECT INFORMATION (additional information required below)

- Accessory Use Development Fill of more than 1 metre
 Minor Variance Request Permitted/Discretionary/Temporary Use Development
 Demolition/Relocation of Existing Building/Structure Structural Alteration (Addition, Alteration)

Application Number: _____ Date Received: _____
Zoning Designation: _____
Roll Number: _____ Assessment Number: _____

OFFICE USE ONLY Meets all provisions of the Official Community Plan and Zoning Bylaw: Yes No
Application requires an Official Community Plan amendment? (Fee: \$150.00 + advertising) Yes No
Application requires a Zoning Bylaw amendment? (Fee: \$100.00 + advertising) Yes No
Payment of application fees received? Yes No
Receipt Number: _____
Use Is: Permitted Discretionary Permanent Temporary Not Allowed
Council Decision: _____ Motion Number: _____

PROPERTY OWNER INFORMATION

Name: _____ Email: _____
Phone: _____ Cell: _____
Mailing Address: _____

APPLICANT INFORMATION (Same as Property Owner)

Name: _____ Email: _____
Phone: _____ Cell: _____
Mailing Address: _____

DEVELOPMENT SITE INFORMATION

Lot: _____ Block/Parcel: _____ Plan: _____
Civic Address: _____
Description of Existing Buildings: _____
Name of Registered Owner: _____

CONSENT OF APPLICANT

I agree that the Municipality may provide the information contained in and with this application to outside agencies to assist the review of the proposed development, and that where required the information may be made available for public review and comment.

I agree that the Municipality may enter the property to inspect the site before, during and after the development proposed for the purposes of administration of the Zoning Bylaw and any permit issued. I agree that the Municipality may file such notices and covenants on the titles of the property subject to this application to protect the interests of the Municipality.

I, _____ solemnly declare that the above statements contained within this application are true, and I make this solemn 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: _____ Date: _____

CONSENT OF PROPERTY OWNER

I, the registered owner of the lands described in this application, consent to the filing of this application by the person(s) or company whose name appears as the applicant above.

Signature: _____ Date: _____

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TOWN OF LA RONGE

DEVELOPMENT PERMIT APPLICATION

ACCESSORY USE DEVELOPMENT

FEE: \$25.00

Current Zoning: _____ Dimensions: _____

Description of Development: _____

Documents Required: Site Plan

DEMOLITION OR RELOCATION OF EXISTING BUILDING OR STRUCTURE

FEE: \$50.00

Description of Building(s): _____

Dimensions of Building(s): _____

Existing Uses: _____ Proposed Uses: _____

Date of Move: _____

Location of Relocation

Zoning District: _____ Plan: _____ Lot: _____ Block: _____

Documents Required: Site Plan

MINOR VARIANCE REQUEST

FEE: \$25.00

Variance Percentage (*note: cannot exceed 10%*): _____

Proposed Setback – Front Yard: _____ Rear Yard: _____ Side Yard: _____

Height: _____ Other: _____

Reason for Variance Request: _____

FILL MORE THAN 1 METRE

FEE: \$50.00

Amount of Fill to be added: _____ Minimum Elevation of Site Prior to Fill: _____

Engineer _____

Documents Required: Elevation Plan Drainage Plan

PERMITTED USE DEVELOPMENT

FEE: \$50.00

DISCRETIONARY USE DEVELOPMENT

FEE: \$75.00 + advertising

TEMPORARY USE DEVELOPMENT

FEE: \$50.00

Zoning District: _____ Project Value: _____

Proposed Use: _____ Existing Use: _____

Commencement Date: _____ Completion Date: _____

Development Dimensions: _____

Development Type: New Development New Use in an Existing Development

Description of Development: _____

Documents Required:

Building Permit

Site Plan

Elevation Plan

Drainage Plan (*if req*)

Aquatic Habitat Protection Permit (*if req*)

Off-Street Parking Plan (*if req*)

STRUCTURAL ALTERATION (Addition, Alteration)

FEE: \$50.00

Existing Use: _____ Proposed Use: _____

Date of Commencement: _____ Date of Completion: _____

Description of Adaptation: _____

Documents Required: Site Plan Elevation Plan Drainage Plan (*if req*)

*ATTACH ANY REQUESTED DRAWINGS OR LETTERS, WITH APPLICATION NUMBER INDICATED, TO THE BACK OF THIS FORM

*SITE PLANS MUST INDICATE ALL DISTANCES FROM THE PROPOSED DEVELOPMENT TO PROPERTY LINES AS WELL AS OTHER BUILDINGS ON THE PROPERTY