



# Land Use Bylaw Textual Amendment Application Package

## FORM 1

### Application Form

Version 4 – October 2021

**\*\*\* PLEASE CONTACT A PLANNER TO DISCUSS THE CHECKLIST REQUIREMENTS FOR ALL LAND USE BYLAW AMENDMENT APPLICATIONS \*\*\***

Applications can be submitted electronically by emailing all required documents to: [development@strathmore.ca](mailto:development@strathmore.ca) or in person to the Development Services Counter at Town Hall. **Application fees must be paid at the time of submission.**

### Applicant & Property Owner Information

|                 |          |             |  |          |             |
|-----------------|----------|-------------|--|----------|-------------|
| Applicant       |          |             | Property Owner (if different than Applicant) |          |             |
| Phone           |          |             | Phone  |          |             |
| Email           |          |             | Email  |          |             |
| Mailing Address |          |             | Mailing Address                              |          |             |
| Town/City       | Province | Postal Code | Town/City                                    | Province | Postal Code |

### Location of Land Use Amendment

|               |     |       |      |  |  |
|---------------|-----|-------|------|--|--|
| Civic Address |     |       |      |  |  |
| Legal Address | Lot | Block | Plan |  |  |



## FORM 2

### Land Use Amendment Application Checklist

All information in the following checklist must be attached to every Land Use Amendment application. **THIS LIST MUST BE SIGNED AND SUBMITTED WITH THE APPLICATION FORM.**

### Required Documentation and Information

| <i>Applicant</i>      | <i>Office</i>         |  |
|-----------------------|-----------------------|--|
| <input type="radio"/> | <input type="radio"/> | <b>Certificate of Title</b> dated within 30 days of the date of your application submission      |
| <input type="radio"/> | <input type="radio"/> | Copies of all <b>instruments and documents</b> registered on the Certificate of Title            |
| <input type="radio"/> | <input type="radio"/> | <b>Owner Authorization Form/Affidavit of Corporate Signing Authority</b> (see Form 3 and Form 4) |
| <input type="radio"/> | <input type="radio"/> | <b>Right of Entry Form</b> (see Form 3)  |
| <input type="radio"/> | <input type="radio"/> | <b>Land Use Bylaw Amendment Application Fee</b>  |
| <input type="radio"/> | <input type="radio"/> | <b>Complete Site Plan (2 copies)</b> that includes the following:                                |
| <input type="radio"/> | <input type="radio"/> | a. North Arrow and Key Map (showing adjacent properties within 200m of the site)                 |
| <input type="radio"/> | <input type="radio"/> | b. A written explanation of why the proposed change is necessary and beneficial to the Town      |
| <input type="radio"/> | <input type="radio"/> | <b>Site Contamination Disclosure</b> (see Form 5)  |
| <input type="radio"/> | <input type="radio"/> | <b>Digital Copies of the Entire Application Package</b>  |

**NOTE:** The Planner may request additional information beyond the checklist requirements.

**NOTE:** By signing your name on the signature line below, you agree that all information submitted on this form is true.

\_\_\_\_\_  
*Owner/Applicant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Application Screened for Completion By: (Planner)*

\_\_\_\_\_  
*Date*

**FORM 3****Right of Entry & Owner Authorization Form**

All information in the following form must be filled-out and submitted with every Land Use Amendment application.

**OWNER AUTHORIZATION**

I/We \_\_\_\_\_

*Print name(s) of registered owner(s)*

Being the registered owner(s) for \_\_\_\_\_

*Legal description and/or municipal address of land*

Do hereby authorize \_\_\_\_\_

*Individual or firm making application*

To submit a Land Use Amendment application on our behalf for the above described property.

\_\_\_\_\_  
*Owner Signature*

\_\_\_\_\_  
*Date*

**RIGHT OF ENTRY**

I/We \_\_\_\_\_

*Print name(s) of registered owner(s)/applicant(s)*

Being the registered owner(s)/applicant(s) for \_\_\_\_\_

*Legal description and/or municipal address of land*

Do hereby authorize representatives of the Town of Strathmore to enter upon the subject lands for the purpose of site inspection(s) to evaluate the proposed Land Use Amendment application.

\_\_\_\_\_  
*Owner/Applicant Signature*

\_\_\_\_\_  
*Date*

**FORM 4****Affidavit of Corporate Signing Authority**

I, \_\_\_\_\_, of \_\_\_\_\_ make oath and say:

1. I am an officer or director of \_\_\_\_\_ being the corporation named in the Land Use Rezoning / Subdivision / Area Structure Plan / and/or Development Permit application as submitted to the Town of Strathmore affecting lands legally described as:

\_\_\_\_\_

2. (a) I am authorized to sign the Land Use Rezoning / Subdivision / Area Structure Plan / and/or Development Permit application on behalf of the corporation without affixing a corporate seal; and
- (b) I am authorized to sign a letter appointing an agent to act on behalf of the corporation regarding the Land Use Rezoning / Subdivision / Area Structure Plan / and/or Development Permit application(s) without affixing a corporate seal; and

I hereby appoint \_\_\_\_\_ as our agent for the above-mentioned application(s)

If Corporate seal is not used

SWORN before me at \_\_\_\_\_)

\_\_\_\_\_

Print Name

In the \_\_\_\_\_)

This \_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_)

\_\_\_\_\_

Signature

Affix Corporate Seal here

\_\_\_\_\_)

Commissioner of Oaths

In and For the Province of Alberta

**FORM 5****Site Contamination Disclosure**

Please be aware further site assessments may be required as part of the review of your application.

**ACTIVE ENVIRONMENTAL SITE INVESTIGATIONS**

1. **Are you aware of any active environmental investigations for this site?** *E.g. audits, assessments, tests, surveys or studies.*

YES

NO

2. **If you answered YES to question #1 above, please provide a brief description of each environmental investigation.**

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**HISTORICAL SITE REMEDIATION**

3. **Are you aware of any historical site remediation or a request for such to occur on this site?** *E.g. audits, assessments, tests, surveys or studies.*

YES

NO

4. **If you answered YES to question #3 above, please provide a brief description.**

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*Owner/Applicant Signature*

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*Date*