



TOWN OF EDSON

Statutory Plan Amendment \$900
Land Use Bylaw Amendment \$800

STATUTORY PLAN OR LAND USE BYLAW AMENDMENT APPLICATION

Applicant:

Contact Number(s): Fax #:

Mailing Address:

E-mail Address:

Registered Owner(s) of Land: Contact #:

Plan Type: Bylaw No.:

Legal Description: Plan: Block: Lot: Long Legal:

Proposed Amendment Involves:
(attach a separate page if more room is needed)

Applicant Signature: Date:

NOTE: If the Applicant is not the registered owner of the land the Owner Declaration must be signed below.

OWNER DECLARATION

I/We hereby give our consent for the Applicant to make an application to amend a statutory plan or Land Use Bylaw and also for an officer of Council to enter upon these lands or buildings to conduct any investigation as may be required in consideration of this application.

Signature of Land Owner(s): Date:

Office Use Only	Bylaw No.: _____ Application Fee: \$ 800.00					Date Application Received
	Receipt No.: _____ Tax Roll No.: _____					
	Certificate of Title No.: _____					
	LINC No.: _____					
	Corporate Search: _____					
Public Works	Engineering	Finance	Protective	FCSS		