

THIS FORM IS TO BE COMPLETED IN FULL BY THE REGISTERED OWNER OF THE LAND THAT IS THE SUBJECT OF THE APPLICATION OR BY AN AUTHORIZED PERSON ACTING ON HIS/HER BEHALF.

1	Name of the registered Owner(s) of the land to be subdivided: Mailing address of the Registered Owner(s):		
	Telephone No: (day) Cellular: E-mail:		
2	Authorized Person(s) acting on behalf of the registered Owner(s):		
	Mailing address of the Authorized person(s):		
	Telephone No: (day) Cellular: E-mail:		
3	LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED		
	Being all/part of: Plan: Block: Lot: Lot: Land Use District:		
	All/part of the: 1/4 Sec: TWP: 53 RGE: 17 W5M Title No.:		
	Area of the above parcel of land to be subdivided:		
	Municipal Address: Explain proposed subdivision:		
4	LOCATION OF LAND TO BE SUBDIVIDED Is the land situated immediately adjacent to the Municipal Boundary?		
	Is the land situated within 1.6 km of the right-of-way of a Highway? 🔽 No 🔽 Yes HWY No.:		
	Is the land adjacent to or contain a stream, creek, other body of water and/or a drainage ditch or canal?		
	No Yes Name of Water Body: Other:		
	Is the land situated within 1.5 km of a sour gas facility? No Yes		
5	EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED		
	Existing use of the land:		
	Proposed use of the parcels being created: Residential Commercial Industrial Institutional		
	Proposed use of the residual parcel:		
	Describe any building and any structures on the land and whether they are to be demolished or removed:		

Town of Edson

Edson

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PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED		
cribe the nature of the topography of the land:	Other:	
scribe the nature of the vegetation and water on the land:	Other:	
scribe the kind of soil on the land:	other:	
ATER AND SEWER SERVICES		
nner of providing water supply:	Manner of providing sewage disposal:	
Any Personal Information that is provided to our office is being collected under the Authority of the Freedom of Information and Protection of Privacy Act and will be used only in accordance with that Act.		
REGISTERED OWNER / PERSON ACTING ON OWNER(S) BEHALF		
Ve)	hereby certify that	
☐ I (We) am/are the registered Owner(s) OR ☐ I am the agent authorized to act on behalf of the registered Owner(s)		
and that the information given on this form is full and complete and is, to the best of my (our) knowledge, the facts relating to this subdivision application.		
Printed name of Owner(s):		
nature(s):	Date:	
AUTHORIZATION		
Ve)	being the registered Owner(s) of the land(s) subject of	
s application do here by authorize	to make application to subdivide the	
above described land(s) on my (our) behalf.		
nature(s):	Date:	
RIGHT OF ENTRY CONSENT		
Ve)	being the registered Owner(s) of the lands(s) subject o	
this application do hereby authorize representatives of the TOWN OF EDSON and other agencies to enter upon my (our) land(s) so that they may inspect the same in connection with my (our) Subdivision Application.		
inature(s):	Date:	
OFFICE USE ONLY	Date Stamp Application Received	
ial Fee: Rec. No: Date: _		
al Fee: Rec. No: Date:		
OFFICE USE ONLY	Date Stamp Application Receive	