

WEST CENTRAL PLANNING AGENCY

#101, 5111 – 50 AVENUE WETASKIWIN, ALBERTA T9A 0S5

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ADMIN@WESTCENTRALPLANNING.CA

APPLICATION FOR SUBDIVISION APPROVAL

WCPA File # _____

Date Received: _____

Fees Received: _____

Registered Plan # _____

REGISTERED OWNER

Name(s): _____

Number of owner(s): _____ If more than one owner, contact name: _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Telephone: _____ Fax: _____

E-mail: _____

LEGAL DESCRIPTION OF LAND TO BE SUBDIVIDED

Quarter _____ Section _____ Township _____ Range _____ Meridian _____

Lot _____ Block _____ Plan _____

Rural **OR** Municipal Address if any _____

Area of current title: _____ acre/ha^(circle one) Area of lot(s) to be created: _____ acre/ha^(circle one)

LOCATION AND PRESENT USE

Name of Municipality _____

If the land is immediately adjacent to a municipal boundary, give name of the other municipality _____

If the land is within half a mile (800m) of a highway or secondary road, give its number _____

If the proposed parcel is within 1.6km (one mile) of a sour gas facility, give its location _____

If the proposed parcel contains or is bounded by a river, stream, lake or other water body, or by a drainage ditch or canal, give its name _____

Present land classification (zoning) _____

PROPOSED SUBDIVISION

Describe the proposed subdivision _____

Number of lots to be created _____

Describe any existing buildings
On the proposed parcel(s) _____

List all utility services available
(water, sewer, gas, power, etc) _____

Describe the soil, slope and vegetation _____

Describe the present sewage disposal
system and indicate its location on a sketch _____

