



RESORT VILLAGE OF CANDLE LAKE ZONING or OFFICIAL COMMUNITY PLAN BYLAW AMENDMENT APPLICATION

Box 114
Candle Lake, SK
S0J 3E0
ph: 306-929-2236
fx: 306-929-2201

SUBMIT TO: planning@candlelake.ca

Amending the Zoning or Official Community Plan Bylaw requires public notice. Advertising costs for public notice are the responsibility of the applicant.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; background-color: #e0f0e0;">ZONING BYLAW #</td> <td style="width: 30%;"></td> </tr> <tr> <td style="background-color: #e0f0e0;">OFFICIAL COMMUNITY PLAN BYLAW #</td> <td></td> </tr> </table>	ZONING BYLAW #		OFFICIAL COMMUNITY PLAN BYLAW #	
ZONING BYLAW #					
OFFICIAL COMMUNITY PLAN BYLAW #					

PROPERTY	CIVIC ADDRESS	LEGAL LAND DESCRIPTION	1/4	SEC	TWP	RGE	W2M
	SUBDIVISION	LOT(S)	BLK/PARCEL		PLAN		

APPLICANT/OWNER	Titled Owner (Private or Corporate)			Corporation Contact Name			
	Mailing Address		City		Province		Postal Code
	Phone (Check best use) <input type="checkbox"/> Cell <input type="checkbox"/> Other			Email			

PROPOSED AMENDMENT (list sections of the bylaw you want to propose changes to)

REASON FOR AMENDMENT (LIST ALL - to change regulations; to rezone; to facilitate subdivision; add a new permitted or discretionary use, etc.)

ATTACHMENTS	<input type="checkbox"/> Plans (where applicable)	Scale drawing or proposed subdivision plan including: <ul style="list-style-type: none"> • site dimensions • location and dimensions (including heights) of all existing and proposed buildings (including accessory buildings and decks)
	<input type="checkbox"/> Other	Any supporting documents

APPLICATIONS WILL NOT BE PROCESSED UNTIL ALL REQUIRED INFORMATION AND FEES OR DEPOSITS HAVE BEEN RECEIVED

I hereby acknowledge that I have read this application and certify that the information contained herein is correct.

I hereby acknowledge that I understand that permission to begin development is not granted to me until Council adopts the amendment and a Development Permit signed by the Development Officer or Chief Administrative Officer is returned to me.

I hereby agree to comply with the Zoning Bylaw and Official Community Plan of the local authority and acknowledge that it is my responsibility to ensure compliance with the bylaws of the local authority and with any applicable municipal, provincial, or federal bylaws, codes, acts and regulations regardless of any plan review or inspections that may or may not be carried out by the local authority or its authorized representative.

I agree to pay for all costs associated with this application including any public notice advertising costs.

Applicant Signature Date

Landowner Signature Date

OFFICE USE ONLY				
Fees		Receipt No.		Date
Amendment Fee	\$50.00			
Public Notice Advertising	As required			
CURRENT ZONING DISTRICT:	<input type="checkbox"/> RA -Residential Acreage <input type="checkbox"/> RA1 – Residential Acreage <input type="checkbox"/> R1 – Low Density Residential	<input type="checkbox"/> R2 – Med Density Residential <input type="checkbox"/> R3 – Small Dwelling Residential <input type="checkbox"/> RMH – Mobile Home Court Residential	<input type="checkbox"/> C1 – Commercial <input type="checkbox"/> CS – Community Service <input type="checkbox"/> IL – Industrial <input type="checkbox"/> RC – Resource Conservation	
LAND USE:	<input type="checkbox"/> PERMITTED	<input type="checkbox"/> DISCRETIONARY	<input type="checkbox"/> NOT ALLOWED (A Zoning Bylaw Amendment application must accompany this form)	