

Application # _____
 Development Permit Fees: _____
 Building Permit Fees: _____
 Off Site Levies: _____
 Damage Deposit: _____
 Safety Codes Fees: _____
 Other Fees: _____
Total: _____

DEVELOPMENT PERMIT APPLICATION

Town of Innisfail, Alberta



4943 – 53 Street
 Innisfail, AB T4G 1A1
 Phone: (403) 227-3376

LAND FILE # _____

I HEREBY MAKE APPLICATION UNDER THE PROVISIONS OF THE LAND USE BYLAW FOR A DEVELOPMENT PERMIT IN ACCORDANCE WITH THE PLANS AND/OR SUPPORTING INFORMATION SUBMITTED HEREWITH AND WHICH FORM PART OF THIS APPLICATION.

Applicant Name: _____ Telephone: _____

Mailing Address: _____ Postal Code: _____

Address Of Property To Be Developed: _____

Legal Description: Lot _____ Block _____ Plan _____

Registered Owner: _____ Address: _____

Existing Use: _____ Land Use District: _____

Proposed Use: _____

Proposed Building Works: _____

New Building: _____ Renovation / Alteration: _____

Parcel Type: Interior _____ Corner _____ Parcel Area: _____

Front Yard: _____ Side Yards: _____ Rear Yard: _____

Floor Area: _____ Parcel Coverage: _____

Height of Building: _____ Number of Off-Street Parking Stalls: _____

Size of Off-Street Parking: _____

Mechanical Contractor: _____

Electrical Contractor: _____

Plumbing & Gas Contractor: _____



Application For **Permitted Use:** Yes No

Application For **Discretionary Use:** Yes No

Application For **Similiar Use:** Yes No

Application For **Other:** Yes No

Estimated Cost of the Project or Contract Price: \$ _____

Estimated Date of Commencement & Completion: _____

Date of Application: _____

Signature of Applicant: _____

Applications Shall Be Accompanied By The Following:

1. Non-refundable processing fee for Permitted Use of \$2.00 per \$1,000.00 of constructed value, with a minimum fee of \$20.00 and a maximum fee of \$100.00. In any case no fee for a single family or duplex Development Permit shall exceed \$40.00. For Discretionary or similar uses the above fee shall be increased by 50%.
2. A scaled site plan in duplicate showing the treatment of landscaped areas, if required. The legal description, the front, rear, and side yards, if any. Any provision for off-street loading and vehicle parking, and access and egress points to the parcel.
3. Scaled floor plans, elevations and building sections in duplicate.
4. Payment of all fees.

Further information may also be required.

ALL OF THE STATEMENTS AND REPRESENTATIONS CONTAINED IN THE ATTACHED DOCUMENTS FILED IN SUPPORT OF THIS APPLICATION SHALL BE DEEMED PART OF THIS APPLICATION, FOR ALL PURPOSES SUFFICIENT INFORMATION SHALL BE SUBMITTED WITH EACH APPLICATION TO ENABLE THE BUILDING INSPECTOR / DEVELOPMENT OFFICER TO DETERMINE WHETHER OR NOT THE PROPOSED WORK/DEVELOPMENT WILL CONFORM TO THE ALBERTA BUILDING CODE AND THE LAND USE AND ZONING BYLAW OF THE TOWN OF INNISFAIL.

DECLARATION:

I, THE UNDERSIGNED, _____, AM THE AUTHORIZED AGENT OF THE OWNER NAMED ABOVE AND I CERTIFY THE TRUTH OF ALL STATEMENTS AND REPRESENTATIONS CONTAINED THEREIN.

I UNDERSTAND THAT THE ISSUANCE OF A PERMIT SHALL NOT BE DEEMED A WAIVER OF ANY OF THE PROVISIONS OF ANY BYLAWS OR REQUIREMENTS OF THE ALBERTA BUILDING CODE 1997 OR REGULATIONS MADE THEREUNDER, NOTWITHSTANDING ANYTHING INCLUDED IN OR OMITTED FROM THE PLANS OR OTHER MATERIAL FILED IN SUPPORT OF OR IN CONNECTION WITH THE ABOVE APPLICATION.

I ACKNOWLEDGE THAT IN THE EVENT A BUILDING PERMIT IS ISSUED, ANY DEPARTURE FROM PLANS, SPECIFICATIONS OR BUILDING LOCATIONS PROPOSED IN THE ABOVE APPLICATION IS PROHIBITED AND SUCH COULD RESULT IN THE PERMIT BEING REVOKED.

I FURTHER ACKNOWLEDGE THAT IN THE EVENT THE PERMIT IS REVOKED FOR ANY CAUSE OF IRREGULARITY ON NON-CONFORMITY WITH BYLAWS OR REQUIREMENTS OF THE ALBERTA BUILDING CODE 1997 OR REGULATIONS MADE THEREUNDER, THERE SHALL BE NO RIGHT OF CLAIM WHATSOEVER AGAINST THE TOWN OF INNISFAIL OR ANY OFFICIAL THEREOF AND ANY SUCH CLAIM IS HEREBY EXPRESSLY WAIVED.

Date: _____ Signature: _____

Authorized Agent For Owner