



Yellowhead County

APPLICATION TO AMEND EDSON URBAN FRINGE INTERMUNICIPAL DEVELOPMENT PLAN 01.22

I/We hereby make application to amend/adopt the Edson Urban Fringe Intermunicipal Development Plan 01.22 as outlined in the supporting information submitted with this application form.

Registered Owner(s)		Telephone	
Mailing Address			
City/Town		Postal Code	
Applicant (if different than Owner)		Telephone	
Mailing Address			
City/Town		Postal Code	

I/We _____ hereby certify that

I am/We are the registered owner(s) of

I/We have been designated as the agent(s) of the registered owner of

Certificate of Title #	Lot	Block	Plan
NW / NE / SW / SE (please indicate)	Section	Township	Range
			W5M

Signature of Applicant(s)

Date

Signature of Registered Owner(s)

Date



Proposed Admendment (describe – please attached sheet if additional space required)

I/We enclose \$1,500.00 being the application fee, payable to Yellowhead County.

This application form must identify the applicant, provide the legal description and municipal address of the lands to which the application relates, and describe the proposed amendment. The following supporting documentation is required:

- A Copy of the Certificate of Title.
- Map(s) illustrating the area affected by the proposed amendment.
- Purposes and reasons for amending the Conceptual Plan.
- Any other information, which explains or supports the proposed amendment.

The proposed amendment will be reviewed by the Planning Department who will make a recommendation to Council. Public Notice of the proposed amendment will be given in accordance with the provisions of the Municipal Government Act, Chapter M-26 R.S.A., 2000

****50% refund will be provided if item does not progress to 1st reading***

This personal information is being collected under the authority of Municipal Government Act, Being Chapter M-26 R.S.A., 2000 and will be used to process conceptual plan amendments. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act, Chapter F-18.5 R.S.A., 2000. If you have any questions about the collection of this personal information, please contact the Director of Planning, Yellowhead County, 2716-1 Ave., Edson AB T7E 1N9, (780) 723-4800.

Application No _____	Date Received _____
----------------------	---------------------