

DEVELOPMENT PERMIT

RENEWAL APPLICATION

FOI	R OFFICE USE ONLY
APPLICATION NO.	
ROLL NO.	
FEES PAID	
DATE OF RECEIPT	

PREVIOUS DEVELOPMENT PERMIT NUMBER (Eg: PF	RDP#):	
LEGAL LAND DESCRIPTION OR MUNICIPAL ADDRE	SS:	
APPLICANT/OWNER		
Applicant Name:		Email:
Business/Organization Name (if applicable):		
Mailing Address:		Postal Code:
Telephone (Primary):	Alternative:	
Landowner Name(s) per title (if not the Applicant):		
Telephone (Primary):	Email:	
RENEWAL APPLICATION FOR - List purpose and scope	e of work	
I hereby aknowledge (Applicant initials below):		
a) That there are no changes or variances request	ed for the existing	operations on site.
<u>OR</u>		
That changes or variances requested for the op	eration are identifi	ïed below:
		
b) That if any changes are proposed, or any chan as part of the Development Authority's review,		
AUTHORIZATION		
I.	(Full name in Blo	ock Capitals), hereby certify (initial below):
That I am the registered owner OR That I	•	act on the owner's behalf (complete
Landowner Authorization letter).		
That the information given on this form and relate knowledge, a true statement of the facts relating		•
That I provide consent to the public release and c submitted/contained within this application as par collected in accordance with s.33(c) of the Freedo	t of the review pro	ocess. I acknowledge that the information is
Right of Entry (Site Inspection): I authorize/ack parcel(s) of land for purposes of investigation and Section 542 of the Municipal Government Act.	nowledge that Ro	ocky View County may enter the above
Applicant Signature	Date _.	



APPLICATION CHECKLIST – DP RENEWAL APPLICATION Select [√] all that are included within application package. Incomplete applications may not be accepted for processing

☐ CURRENT LAND TITLES CERTIFICATE COPY - dated within 30 days of application: ☐ I have included a current Land Titles Certificate with my submission					
O I agree to have the County pull a current Land Title Certificate for an addition charge of \$20.00					
□ LETTER OF AUTHORIZATION - dated within 30 days of application: Signed by the registered landor person acting on behalf (if not the Applicant). If registered owner on title is a company, authorization to be company letterhead <u>or</u> as an affidavit (signed by a Commissioner of Oaths).					
□ DEVELOPMENT PERMIT TIME EXTENSION AGREEMENT					
☐ INFORMATION SHEET (if applicable, as required by the Development Authority)					
 □ REVISED SITE PLAN (if applicable, as required by the Development Authority) ○ Identify site boundaries, business area, any outdoor storage area with dimenisons, signage location setbacks etc. 	on, any changes to				
 COVER LETTER (if applicable, as required by the Development Authority), including: Detail proposal and any changes/deviations from the approved development permit for example: o work, area of operation on site, day and hours of operation, number of employees, parking provision. Identify any variances requested for the proposed operations. Please send complete submission to development@rockyview.ca . Once a County representative has verified will contact you to collect payment.	ons, etc.				
FOR OFFICE USE ONLY					
Proposed Use(s): Land Use District:					
Applicable ASP/CS/IDP/MSDP:					
ncluded within file: $\ \square$ Information Sheet $\ \square$ Parcel Summary $\ \square$ Site Aerial $\ \square$ Land Use Map Aerial	☐ Site Plan				
NOTES FOR FILE MANAGER:					

Staff Signature:



Planning & Development Services

	File Number / Roll Number
Time Extension A Development Perm	
APPLICANT:	
LEGAL DESCRIPTION:	
The Municipal Government Act recommends that the County is required to make a decision on a complete of its receipt application, unless an agreement has be Development Authority to extend the 40 day period.	d Development application within 40 days
In order to permit the Development Authority of Rock application, we are requesting that you enter into the below.	
If you concur with our request, please complete the a	greement set out below and forward it to:
ROCKY VIEW COUNTY Planning and Development Services 262075 Rocky View Point Rocky View County, Alberta T4A 0X2 development@rockyview.ca	
In accordance with the Municipal Government Act,	
I/We,	unty to extend the time prescribed for the
 Date	Applicant's Signature



403-230-1401 questions@rockyview.ca www.rockyview.ca

LETTER OF AUTHORIZ	ATION – PLANNI	NG AND DEVE	ELOPMENT SE	RVICES
I, (We)			(print nan	ne) Owner 1
			(print nar	ne) Owner 2
being the owner(s) of: Lot:	Block:	Plan:		_
Legal Description:				
Quadrant ¼ Section	Township	Range	West of	Meridian
give		(print r	name of Applican	t)
permission to act on my (our) be	ehalf for the following	g application at th	ne above-noted p	roperty
(select one): ☐ Development Permit				
□ Subdivision				
□ Redesignation				
☐ Local Plan				
			Owner	1 Signature
			Owner	2 Signature
				Date Signed

AFFIDAVIT - VERIFYING CORPOR	RATE SIGNING AUTHORITY	
Ι,	, of	
make oath and say:		
I am the officer/director of (company name):		
being the corporation named as the owner, in the Develo	ppment Permit / Subdivision / Redesignation	/ Loca
Legal Description		
/ Lot:	FIGUFIGU	
above-noted property.	MISSIONED FOR CATUS	
FOR USE BY APPOINTED COM	MISSIONER FOR OATHS	
SWORN/AFFIRMED before me		
at the (City/County/Town):	,	
in the Province of Alberta, this day of		
	(month) (year).	
in the Province of Alberta, this day of	(month) (year).	
	(month) (year).	