

# **DEVELOPMENT PERMIT**

### APPLICATION

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

AFFLICATION	ı			DATE OF RECEIPT	Г	
APPLICANT/OWNER	₹					
Applicant Name:				Email:		
Business/Organizatio	n Name (if applic	able):				
Mailing Address:					Postal Co	de:
Telephone (Primary):			Alternative:			
Landowner Name(s)	per title (if not the	e Applicant):				
Business/Organizatio	n Name (if applic	able):				
Mailing Address:					Postal Co	de:
Telephone (Primary):			Email:			
LEGAL LAND DESC	RIPTION - Subje	ect site				
All/part of: 1/4	Section:	Township:	Range:	West of:	Meridian	Division:
All parts of :		Block:	Plan:	Pai	rcel Area (ac/l	na):
Municipal Address:				Land Use Dis	strict:	
APPLICATION FOR	- List use and sc	ope of work				
Variance Rationale inclu	ded: DYES NO	□ N/A DP Checklis	st Included:   YES	NO Name of R	VC Staff Membe	r Assisted:
b. Parcel within	1.5 kilometres of	within 100 metres of a sour gas facility (	well, pipeline or pla			☐ YES ☐ NO ☐ YES ☐ NO
(Well Map Vie	wer: https://extma	pipeline present on t pviewer.aer.ca/AERA	bandonedWells/Ind	,		☐ YES ☐ NO
•	as direct access	to a developed Mur	nicipal Road (acce	ssible public re	oadway)	☐ YES ☐ NO
AUTHORIZATION						
l,			(Full name in Bloc	ck Capitals), he	ereby certify (	initial below):
	•	er ORThat I				
knowledge, a	true statement of	n this form and relating to	o this application.			•
submitted/co	ntained within this	oublic release and d s application as part s.33(c) of the <i>Freed</i> c	of the review prod	ess. I acknowl	edge that the	information is
purposes of i		knowledge that Roc enforcement related				
Applicant Signature			Landov	vner Signatur	e	
				_		



FO	R OFFICE USE ONLY
APPLICATION NO.	
ROLL NO.	
LAND USE DISTRICT	

# **HOME-BASED BUSINESS (TYPE II)**

## **INFORMATION SHEET**

"Home-Based Business (Type II)" means a use where business is cond Building with moderate weekly visits, and which may have employees wh secondary to the residential use of the parcel and do not change the residential	o does not live on	the property. Uses are
BUSINESS OPERATIONS		
Business Name:		
Description of Business:		
Do you live on the subject parcel?	<b>O</b> 1/	<b>O</b>
Home-Based Business (Type II) is an accessory use of a principal dwelling.	O Yes	○ No
NUMBER OF NON-RESIDENT EMPLOYEES		
"Home-Based Business (Type II) shall not exceed the number of non-resident em	ployees of two (2) a	t any time."
Are you requesting a variance to the number of non- resident employees (maximum two)?	O Yes	O No
If yes, please state the number of non-resident employees requested and employee variance.	elaborate the reas	sons for the non-resident
BUSINESS RELATED TRIPS		
"Home-Based Business (Type II) may generate up to eight (8) business related v four (4) business related visits per day in all other Districts."	visits per day in an A	Agricultural District and up to
Number of business-related visits (staff or client) per day:		
Number of business-related visits (staff or client) per week:		
Are you requesting a variance to the number of business-related visits per day?	O Yes	O No
If yes, please elaborate on the reasons for the variance in business-related	d visits per day.	
COMMERCIAL VEHICLE USE (if applicable)		
"Vehicle (Commercial) means a vehicle, motor, used for commercial or industrial in length, such as gravel trucks, gravel trailers, highway truck tractors, high and vacuum trucks."		
Does your business own or operate any Commercial Vehicle(s)	O Yes	◯ No
If yes, Total number of Commercial Vehicles owned or operated by the Ho	ome-Based Busine	ess:
Will any Commercial Vehicle(s) owned by a second party be entering your parcel as part of this Home-Based Business use?  (including pickups and deliveries)	O Yes	○ No
lf yes, what is the total number of commercial vehicles expected for picku	os and deliveries:	
If you answered yes to any of the above, please provide the following info	rmation:	
Total number of commercial vehicle business related visits (staff or	, .	
Total number of commercial vehicle business related visits (staff o	$\sim$	
Does your parcel have direct access to a paved road?  Please provide a traffic route that the Corporaried Vehicle (a) will up	Yes	No No
Please provide a traffic route that the Commercial Vehicle(s) will use	se to and from the	subject parcel.



EMPLOYEE AND VISITOR PARKING		
Will there be any employees or visitors parked on the property?	O Yes	O No
If yes, please indicate the location of employee and visitor parking area on the site plan.		
BUSINESS USE AREA(s) Principal Building Accessory Building	ing Outside	Storage New Building
OUTSIDE STORAGE (If applicable)		
Are you proposing any Outside Storage areas for your business?	O Yes	○ No
If yes, please indicate the location, setbacks to adjacent properties, dimensions and total a	area of the outside sto	orage on the site plan.
OUTSIDE STORAGE AREA (If applicable)		
"Outside Storage may not exceed 400.0 m2 (4305.56 ft2) or 1% of the parcel area,	whichever is less."	
What is the total area of the proposed Outside Storage?		
Are you requesting a variance to the allowable area of Outside Storage?	O Yes	○ No
If yes, please elaborate on the reasons for the variance of Outside Storage	Area(s).	
OUTSIDE STORAGE SCREENING (If applicable)		
"Outside Storage must be screened from view of adjacent lands and roads."		
What measures will be taken for screening from view of adjacent lands and	roads? (i.e., lands	scaping, fencing etc.)
SETBACK VARIANCE REQUESTED (If applicabe)		
"Outside Storage must meet the minimum setback requirements for buildings."		
Does your Outside Storage meet the minimum setback requirements for buildings?	O Yes	O No
Are you requesting a variance to the minimum setback requirements for	Yes	O No
Outside Storage?  If yes, please elaborate on the reasons for the variance of minimum setback		
in yee, please classials on the reasons is: the variance of himming in establish	r roquironnonio.	
HOURS OF OPERATION		
"Home-Based Business (Type II) shall not operate between the hours of 18:00 and	8:00 if the business	generates noise."
Does your proposed Home-Based Business (Type II) generate noise?	O Yes	◯ No
If yes, are you proposing to operate between 18:00 and 8:00 hours?	O Yes	◯ No



NOISE MANAGEMENT PLAN		
Intent: To minimize unreasonable disturbance to adjacent residents due to busines	ss operations.	
Design and site plan considerations for appropriate business use area(s)	:	
Operational arrangements/noise control measures for business use indo	or and outdoor area(s):	
A noise complaint response process (how would you work with adjacent in the complaint response process).	residents):	
A noise consideration plan if the business is operating between 18:00 and	d 8:00 hours:	
SIGNAGE (If applicable)		
"Only one (1) Fascia Sign or Freestanding Sign is permitted, at the discretion of the	e Development Authority.	n
Are there any proposed signage on site?	O Yes	O No
If yes, please complete <u>Signage - Information Sheet.</u>		
CONFIRMATION OF PARCEL USE		
Please describe how the Home-Based Business will be secondary to the re	esidential use of the pa	rcel and measures
taken to not change the residential appearance of the parcel:		
Applicant Signature	Date	
Applicant Signature	Dalt	



#### DEVELOPMENT PERMIT APPLICATION CHECKLIST - HOME-BASED BUSINESS (TYPE II) PLEASE CHECK OFF [1] ALL THAT ARE INCLUDED IN THE APPLICATION PACKAGE. Incomplete applications may not be accepted for processing. Office Applicant All plans shall be submitted as one PDF document in DIGITAL form APPLICATION FORM(S) AND CHECKLIST: All parts completed and signed. INFORMATION SHEET(S): A completed Home-Based Business (Type II) Information sheet. If new accessory building(s) is proposed, please complete Accessory Building(s) - Information Sheet. If signage is proposed, please complete Signage - Information Sheet. CURRENT LAND TITLES CERTIFICATE COPY: Dated within 30 DAYS of application submission. It can be obtained at Spin2 (https://alta.registries.gov.ab.ca/spinii) OR ☐ I give the Development Authority authorization to pull a Land Title Certificate at a \$20.00 fee. COPY OF ALL NON-FINANCIAL INSTRUMENTS/CAVEATS REGISTERED ON TITLE, if any: It can be obtained at Spin2 (https://alta.registries.gov.ab.ca/spinii) OR ☐ I give the Development Authority authorization to pull the instruments at a fee of \$20.00 each. TIME EXTENSION AGREEMENT: Authorizing the County to continue reviewing your application if there are any delays meeting the 40-day timeline as set out by the Municipal Government Act of Alberta (MGA). LETTER OF AUTHORIZATION: Signed by landowner, authorizing third party representation to act on their behalf as the applicant. AFFIDAVIT: If the registered owner on title is a company, signed and stamped by a Commissioner of Oaths. **COVER LETTER, shall include:** Proposed land use(s) and scope of work on the subject property Detailed rationale for any variances requested Details on days/hours of work, number of employees, parking provisions, types of vehicles, business-related outdoor area, outdoor storage areas, site access/approach, etc. Reference to any Supporting Documents, images, studies, plans, etc. provided within the application SITE PLAN, shall include: Legal description and municipal address All property lines, dimensions, and north arrow Setbacks/dimensions from all property lines to existing buildings, proposed buildings, changes, etc. Dimensions of all buildings/structures/outside storage on site Location and for existing/proposed approach(s)/access to property Identify names of adjacent internal/municipal roads and highways Identify any type of oil wells, septic fields/tanks, or water wells on site, including their distances to existing/proposed buildings Identify any existing/proposed site features such as trees, shelterbelts, canals, waterbodies, etc. Identify site slopes greater than 15% and distances of these slopes from existing/proposed structures Location and labels for easements and/or rights-of-way on title Identify any parking area/parking plan for business operations FLOOR PLANS/ELEVATIONS, shall include: Overall dimensions on floor plans for all proposed buildings/structures Indicate floor area and existing/proposed uses on floor plans and height(s) on elevations and indicate type of building/structure on floor plans and elevations PHOTOGRAPHS: Of existing site, building(s), structure(s), signage, site features, taken from all sides including surrounding context, and when existing floor plans/elevations are not available. SUPPORTING DOCUMENTS (as applicable): Include technical studies/reports and any additional plans relating to the proposed development (lot grading, site lighting, storm water management plans, etc.) FOR OFFICE USE ONLY Proposed Use(s): Land Use District: Applicable ASP/CS/IDP/MSDP: Included within file: Information Sheet ☐ Parcel Summary ☐ Site Aerial ☐ Land Use Map Aerial ☐ Site Plan NOTES: 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 <b>40 days</b>
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

#### ONLY REQUIRED IF YOU ARE ACTING ON BEHALF OF THE REGISTERED OWNER

# LETTER OF AUTHORIZATION – PLANNING AND DEVELOPMENT SERVICES I, (We) \_\_\_\_\_\_ (print name) Owner 1 \_\_\_\_\_ (print name) Owner 2 being the owner(s) of: Lot: \_\_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ **Legal Description:** Quadrant 1/4 Section \_\_\_\_\_Township \_\_\_\_\_ Range \_\_\_\_\_ West of \_\_\_\_\_Meridian give \_\_\_\_\_\_ (print name of Applicant) permission to act on my (our) behalf for the following application at the above-noted property (select one): □ Development Permit ☐ Subdivision ☐ Redesignation □ Local Plan **Owner 1 Signature Owner 2 Signature Date Signed**

## ONLY REQUIRED IF THE REGISTERED OWNER ON TITLE IS A COMPANY

AFFIDAVIT - VERIFYING CORPO	
l,	, of
make oath and say:	
I am the officer/director of (company name):	
being the corporation named as the owner, in the Deve Plan Application (select one), affecting Lands described	lopment Permit / Subdivision / Redesignation / Loca
Legal Description	
/ Lot: _	Block: Plan:
one), on behalf of the corporation without affixing a corp	porate seal and I hereby appoint (name of Applican
	as our agent for the above application at
·	as our agent for the above application at
above-noted property.  FOR USE BY APPOINTED COI	as our agent for the above application at
above-noted property.	as our agent for the above application at
above-noted property.  FOR USE BY APPOINTED COI  SWORN/AFFIRMED before me	as our agent for the above application at
above-noted property.  FOR USE BY APPOINTED COI  SWORN/AFFIRMED before me  at the (City/County/Town):	as our agent for the above application at
above-noted property.  FOR USE BY APPOINTED COI  SWORN/AFFIRMED before me  at the (City/County/Town):	as our agent for the above application at
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