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Office Use Only	
Application No.	
Land Use District	
Roll No.	
Date Received	

Development Permit Application Form – Commercial/Industrial/Home Occupation (Commercial/Industrial Buildings, Additions, Accessory Buildings, Commercial/Industrial Change of Use, Tourist Homes, Short-Term Rental/Bed & Breakfast, Home Occupation 2, Home Occupation 1 (Over 1))

PLEASE NOTE: This application is ONLY for a development permit. If a building permit is also required, you must apply for it separately prior to construction. Providing an email means you consent to receiving documents or communications related to this application, including but not limited to development permit decisions, acknowledgments confirming an application is complete, and any notices identifying any outstanding documents and information by email. Please be sure to complete the entire application. **Failure to send in a complete application can result in a delay of your permit.**

Applicant Information		Property Information	
Name		Municipal Street Address	
Phone		Lot(s)	
Email		Block	
Mailing Address/Box#		Plan	
City and Postal Code			

Land Title Certificate and Registrations (Choose One)	
<input type="checkbox"/> Current Certificate of Title and Registrations on Title (Within 3 Months - Attached) Obtain online from Land Titles (Spin2 website) or a Registries Office	<input type="checkbox"/> I am requesting the Municipality to obtain the required certificate of title and registered documents and apply all costs to the application fee (\$25.00)

PLEASE CONFIRM ONE OF THE FOLLOWING:
<input type="checkbox"/> I am the registered owner of the above noted property <input type="checkbox"/> I have entered into a binding agreement to purchase the above noted property with the registered owner(s) (please attach a copy of the agreement) <input type="checkbox"/> I have permission of the registered owner(s) of the above noted property to make the attached application for a Development Permit (please complete or attach a separate authorization letter from the owner with their contact information)

Type of Development (Check all that apply)						
REQUIRED SUBMISSIONS	Site Plan	Parking Plan (on Site Plan)	Elevation Plans	Floor Plans (Include Basement)	Landscape Plan	Photos (All Sides)
<input type="checkbox"/> Commercial/Industrial Building and Additions	✓	✓	✓	✓	✓	•
<input type="checkbox"/> New/Change of Use	•	•	•	•	•	•
<input type="checkbox"/> Tourist Home	For Sign	✓	•	•	•	Rendition
<input type="checkbox"/> Short-Term Rental	For Sign	✓	•	✓	•	Rendition
<input type="checkbox"/> Home Occupation 2	For Sign	•	•	•	•	Rendition
<input type="checkbox"/> Additional Home Occupation 1	•	•	•	•	•	•
<input type="checkbox"/> Commercial Signage	✓	•	•	•	•	Rendition
<input type="checkbox"/> Moved-In Building	✓	✓	✓	✓	✓	✓

Proposed Use / Description of Proposed or Existing Development and Reason for Variance Request (If applicable):	Anticipated Start Date

The personal information provided as part of this application is collected under Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32(c) of the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing development permits, Land Use Bylaw enforcement and property assessment purposes. The name of the permit holder and the nature of the permit are available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.

DEVELOPMENT SPECIFICATIONS – COMMERCIAL/INDUSTRIAL BUILDINGS, ADDITIONS, ACCESSORY BUILDINGS <i>Provide measurements in metres below and show on site plan (Refer to Page 3 for Site Plan requirements)</i>			
Total Lot Area (m ²)		Front Yard Setback (m)	Primary Front: Secondary Front:
Building Footprint Area (m ²)	Existing:	Rear Yard Setback (m)	
	Proposed:		
Gross Floor Area (m ²) <i>(Roofed floor area of all storeys)</i>		Side Yard Setback (m) <i>(Indicate N/S/E/W)</i>	Side 1:
			Side 2:
Habitable Floor Area (m ²) <i>(Sum of all above grade storeys – do not include garage or basement)</i>		Building Height (m) <i>(Finished Grade to Top of Tallest Peak)</i>	
WATER AND SEWER SERVICES			
Is your property connected to Municipal Services? <input type="checkbox"/> Water <input type="checkbox"/> Sanitary OR <input type="checkbox"/> Requires Connection from Street			
OR <input type="checkbox"/> Private (well) water and Private septic system capacity (if applicable): Capacity: _____ Number of Bedrooms: _____ If none, please describe and show the location of private services on site plan. (water well & private septic system, including disposal)			
PARKING AND ACCESS See Land Use Bylaw Schedule 6 – Off-Street Parking and Loading Area Standards.			
# of parking stalls <u>on</u> property		# of driveway accesses / approaches	
Parking Stall Length (per stall – m ²)		Parking Stall Width (per stall – m ²)	
NEW OR CHANGED USE – COMMERCIAL/INDUSTRIAL <i>(Business License will be required)</i>			
Name of Business		Complete Parking and Access Above	
Existing/Previous Use		New Use	
SHORT-TERM RENTAL/TOURIST HOME <i>(If Applicable – See Land Use Bylaw Schedule 17 – Standards for Short-Term Rental / Bed & Breakfast and Tourist Home)(Business License will be required)</i>			
<input type="checkbox"/> Short-Term Rental/B&B (Within Home Owner’s Primary Residence) <input type="checkbox"/> Tourist Home (Entire Space Rented)			
# of Bedrooms Available		Sign Dimensions (m ²)	
# Bonus Rooms		Sign Height (m)	
# Occupancy Requested		Local Contact Name	
		Local Contact Phone #	
HOME OCCUPATION 2, ADDITIONAL HOME OCCUPATION 1 <i>(Business License will be required)</i>			
Name of Business		Number of Employees	Currently Living on Premises _____ Living off Site _____
# of Daily Customers		Any outdoor storage, commercial vehicles, heavy equipment or retail sales?	
MOVED-IN BUILDING <i>(If Applicable. May require additional authorization from Transportation Department)</i>			
Year of Building		Date of Expected Move In	

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SIGN (See Land Use Bylaw Schedule 11 – Sign Standards)					
Type of Sign		Sign Dimensions	Width (m)		
			Height (m)		
ADDITIONAL PROPERTY INFORMATION				Yes	No
Any abandoned wells on property: If yes, submission required pursuant to ERCB Directive 079				<input type="checkbox"/>	<input type="checkbox"/>
Any known environmental issues or studies effecting this property: If yes, attach description/reports				<input type="checkbox"/>	<input type="checkbox"/>
Any known historic buildings on the property or adjacent property:				<input type="checkbox"/>	<input type="checkbox"/>
Is the entire parcel of land (not just the development site): The subject of a license, permit, approval or other authorization granted by any of the following: Natural Resources Conservation Board, Energy Resources Conservation Board, Alberta Energy Regulator, Alberta Energy and Utilities Board or Alberta Utilities Commission, AND/OR The subject of a license, permit, approval or other authorization granted by the Minister of Environment and Protected Areas? If you answered “Yes” to any of these, please provide the approval, authorization number and/or license number here: _____				<input type="checkbox"/>	<input type="checkbox"/>
AUTHORIZATION					
<ul style="list-style-type: none"> I am aware that this application will be reviewed by the Development Authority and may be delayed or refused if the application and/or information provided is incomplete. I will be notified within 20 days if it is complete or incomplete. I understand that additional information may be required after the application has been deemed complete. I understand if the subject property is located within an area where development constraints exist, (e.g., non-operating landfill, grade issues etc.) additional information and/or reports may be required. The information I have provided herein and herewith is true, and to the best of my knowledge, accurate and complete.					
_____			_____		
Name of Applicant (please print)			Signature of Applicant		
_____			_____		
Name of Applicant (please print)			Signature of Applicant		
_____			_____		
Name of Owner (if different than applicant)			Signature of Owner		
Registered Owner(s) Mailing Address: _____					
Registered Owner Email(s) and Phone Number(s): _____					
OR <input type="checkbox"/> Permission Letter Attached (Use if there is more than one owner, include authorization, signature, and contact information for each owner registered on the land title) If the applicant or owner is a corporation, please attach a current corporate search					

SITE PLAN MUST INCLUDE:

- Property Civic Address and North Arrow
- Adjacent roadway and lanes
- Lot dimensions and lot area
- Existing and Proposed structures identifying dimensions, including height, floor area, building footprint, percentage of lot coverage
- Distances from foundations to front, side and rear property lines (measured perpendicular to the lot line)
- Location of utilities, access, driveway, sidewalks and curbs and any registered utility right of ways or easements (if known)
- Location and number of off-street parking spaces

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SITE PLAN

MUNICIPAL STREET ADDRESS: _____ COMMUNITY: _____



Principal Building Lot Coverage _____%

Accessory Structure Lot Coverage _____%

Parcel Information

Lot Area (m ²)	
Lot Width	
Lot Height	

For New Building

Net Floor Area (m ²)	
Gross Floor Area (m ²)	

Sign Information

Area of Sign (m ²)	
<input type="checkbox"/>	Shown on site plan

Site Plan Checklist

<input type="checkbox"/>	Adjacent Roadways
<input type="checkbox"/>	Adjacent Lanes
<input type="checkbox"/>	Lot Dimensions
<input type="checkbox"/>	Existing Structures
<input type="checkbox"/>	Proposed Structures (If multiple, identify as "A", "B" etc.)
<input type="checkbox"/>	All distances from foundations to front, side and rear property lines
<input type="checkbox"/>	Location of access, driveways and curbs
<input type="checkbox"/>	Location of easements
<input type="checkbox"/>	Location and # of off-street parking
<input type="checkbox"/>	Location of water and wastewater connections
<input type="checkbox"/>	Height (shown on this site plan or separate attachment)
<input type="checkbox"/>	Landscaping (if required)

OFFICE USE:

DP# _____

TAX ROLL# _____