

Development Variance Permit Application

PROPERTY /	ADDRESS:			
LEGAL DESC	CRIPTION:			
CURRENT ZONING:		ROLL#:		
DATE:				
BYLAW TO BE VARIED:		FROM:	TO:	
PROPERTY OWNER		APPLICANT		
Name:		Name:		
Address:		Address:		
Postal Code:		Postal Code:		
Phone:		Phone:		
Email:		Email:		
Signature:		Signature:		
APPLICATIO	N MUST INCLUDE (2 paper copies and an ele	ectronic cop	py)	
□ Current title search (with copies of all relevant easements, covenants, etc.)				
□ Site plan showing all existing buildings and geographical features				
□ Site plan sho	wing development concept			
□ Variance ratio	onale (please see back)			
NEW Site Dis	sclosure Statement (BC's New Contaminated S	Site Investiga	tion Requirements (please	check/initial)
	Attached (if Schedule 2 Uses have occurred on the property in the past)			
	N/A (if Schedule 2 Uses have not occurred on the property in the past)			
	Exempt (demolition, or other works where there is no soil disturbance, etc.)			
For Office L		Jse Only	GL DVP 11-1-507-0000	
DVP Minor Type 1 \$250.00 (External/Internal Referrals)				
□ DVP Minor	Type 2 \$500.00 (Public Notifications)			
□ DVP Type 3	Council Decision \$750.00 (Presentation to C	ouncil)		
Please note	that applications and drawings may be submitted elect	ronically in Ad	obe PDF format, but must be a	ccurate, include all
	dimensions, and Professionally drafted		erred.	
SIGNATURE OF REGISTERED OWNER(S)			OFFICE USE ONLY	
	25.3		Date Received:	, , , , , , , , , , , , , , , , , , ,
DATE		(3)	Fee Paid:	
DATE:		-(4)	Received By:	
			Comments:	



Development Variance Permit Application

