

**Schedule A
APPLICATION FOR SUBDIVISION APPROVAL**

File No:
Name Of Land Owner(s):

Address Of Land Owner(s):

Phone No.:

Subdivision Name (if different from owner):

Documents to be returned to:

Correspondence to be directed to:

LAND TO BE SUBDIVIDED

Civic Address if any:	Parcel Identifier:
Type Of Application: <input type="checkbox"/> Preliminary (Optional) <input type="checkbox"/> Concept (Optional) <input type="checkbox"/> Tentative (Optional) <input type="checkbox"/> Final	Approval Requested For Lot(s) #
Type Of Development Proposed <input type="checkbox"/> Single Unit Dwelling <input type="checkbox"/> Other (please specify):	Is There A Remainder Lot? <input type="checkbox"/> Yes <input type="checkbox"/> No

Assessment Requested From Department of Environment and Labour

Yes No

\$_____ Application Fee attached <input type="checkbox"/> Yes <input type="checkbox"/> No	\$_____ Registration Fee Attached (Final Applications only, payable to <i>Land Registration Office</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No
--	---

Service	Existing	Proposed
Water		
Central Services		
Drilled or Dug Well		
Sewer		
Central System		
On-Site		
Access		
Town Public Street		
Provincial Public Street		
Other		

I certify that I am the owner or am acting with the owner's written consent.

Signature Of Subdivider _____ Date _____