

APPLICATION FOR REZONING OF PROPERTY

Municipal District of Opportunity No. 17 Box 60 Wabasca, AB T0G 2K0

Bus. (780) 891-3778 Fax (780) 891-4283 Toll Free 1-888-891-3778

Name					Deve	Development Permit Number	
Mailing Address							
Telephone (Business)		(Residence	e)		(Other)		
Name of property owner	r if different f	rom applicant.	•				
PROPERTY LO	CATION	•					
Registration Plan	Block	Lot	Rural Legal				
Roll Number	Civic Address						
Current Zoning	Current Developments on Property						
Proposed Zoning	Proposed Development						
Reason for requesting R If you do not have a provide any pertinent	developme					future development, please	
Applications will not If Council accepts th Hearing will be held	e proposal	and First Re	eading is	given, the appli		received. be advertised and a Public	
Agent or La		Date					
For Office Use:							
Date Received	Appli	cation fee paid ((d/m/y)	Reviewed by Cour	ncil (d/m/y)	Bylaw #	
Public Hearing (d/m/y)	Passe	d (d/m/y)		Defeated (d/m/y)			