



Application for Amendment of Official Community Plan or Zoning Bylaw

This application form and accompanying checklist must be completed **in full** by the registered owner of the land or by the authorized agent acting on behalf thereof. This will assist the City in its processing of the application.
PLEASE PRINT

Official Community Plan (OCP)
Current Designation: _____
Proposed Designation: _____
 or **Proposed Text Change:**
Please provide proposed text change and explanation on separate page.

Zoning Bylaw
Present Zoning: _____
Proposed Zoning: _____
 or **Proposed Text Change:**
Please provide proposed text change and explanation on separate page.

INFORMATION OF LAND AFFECTED BY THE PROPOSED AMENDMENT:

Civic Address: _____

Legal Description: _____

Parcel Identifier Number (PID): _____

Property Size: _____ (dimensions or area of parcel area)

OCP Land Use Designation: _____

Present Zoning: _____

REGISTERED OWNERS:

Registered Property Owner Name: _____

Day Time Telephone Number: _____
Alternate Number (Cell / Pager): _____

Mailing Address: _____

Fax Number: _____

Email Address: _____

APPLICANT OR AUTHORIZED AGENT:

Contact Name: _____

Day Time Telephone Number: _____
Alternate Number (Cell / Pager): _____

Mailing Address: _____

Fax Number: _____

Email Address: _____

Date Received: _____ Date Deemed Complete: _____
 File No: 3360.20. _____ Proposed Amendment Bylaw No.: _____ City Official: _____

OFFICE USE ONLY

THE FOLLOWING MUST ACCOMPANY AN AMENDMENT APPLICATION TO BE DEEMED COMPLETE:

Application Form

Completely filled out and including all supporting information. Any questions with regards to zoning or land use designation contact Planning Staff.

Development Proposal

An accompanying letter with the following information clearly articulated:

- Describe Existing Use
- Describe Proposed Use and Development
- Reasons & Comments in Support of the Application

Copy of Current Certificate of Title(s) for the lands involved

Dated no more than 10 days prior to the date of application. Include copies of all Restrictive Covenants and Caveats.

Letter of Authorization

If any agent is making the application on behalf of the current property landowner, a letter from the property owner must authorize the amendment application, dated no more than 10 days prior to date of application.

Land Owned by Numbered Companies

If the owner of the land is registered as a numbered company, the names of the principals of the numbered company shall be supplied.

Payment of Fees Applicable

OCP Amendment.....\$1200
 Zoning Bylaw Amendment.....\$1200
 Combined OCP & Zoning Amendment.....\$1600
 Site Profile (required for rezoning).....\$ 100

Proof of Submission of Related Application (if required)

- ALR Application (Agricultural Land Commission)
- Site Profile (Ministry of Environment)
- Controlled Access Permit (Ministry of Transportation)

Miscellaneous Information

Any other information deemed necessary by the City, including but not limited to:

- Legal Survey Certificate**
May be required to confirm land parcel dimensions, shape, size and location of all built structures and improvements. The survey shall be undertaken by a registered BC Surveyor.
- Color Photographs**
That provide a comprehensive visual account of the entire site and adjacent properties.
- Technical Documentation**
May be required to provide support for the proposed Amendment Application.

Personal information contained on this form is collected under the *Local Government Act* and in accordance with the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of processing the application. For questions or additional information pertaining to your personal information, contact City Hall at 250.426.4211.

Please Note: The land owner in the process of submitting this application hereby recognizes and accepts that this material will become available to the public as part of the application, review and approval process.

_____ **Land Owner's Initials**

The applicant is advised to discuss the proposed Amendment Application with City Staff to clarify what additional information may be required.

PLEASE NOTE: The City reserves the right to request additional information once they have reviewed the application.

I/We hereby declare that the information contained herein is, to the best of my/our knowledge, factual and correct.

Owner/Agent Name

Signature of Applicant

Date

THE CITY OF CRANBROOK

Phone: (250) 426-4211
 Toll Free: (800) 728-2726
 Facsimile: (250) 426-7264
 Address: 40-10th Avenue South Cranbrook, BC VIC 2M8

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