



South Central Planning District

P.O. BOX 40 130 Broadway St.
HOLLAND, MB R0G 0X0
PH: 204-526-2800
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*R.M. of Victoria
R.M. of South Norfolk
R.M. of Lorne
Town of Treherne
Village of Somerset
Village of Notre Dame de Lourdes*

DEVELOPMENT PERMIT APPLICATION

DATE: _____ PHONE: _____
APPLICANT NAME: _____ FAX: _____
APPLICANT ADDRESS: _____ CELL: _____
_____ WORK: _____
_____ E-MAIL: _____

LEGAL DESCRIPTION: _____

GENERAL DESCRIPTION OF WORK: _____

OWNER: _____ ADDRESS: _____ PHONE: _____
CONTRACTOR: _____ ADDRESS: _____ PHONE: _____
OTHER: _____ ADDRESS: _____ PHONE: _____

DOCUMENTS RECEIVED:

_____ Plans -- Copies
_____ Site Plan/Posting
_____ Certificate of Title _____ Roll No. _____
_____ Surveyor's certificate
_____ Other: _____

DEVELOPMENT PLAN: _____

ZONING BY-LAW:

Property zoned _____ Permitted _____ Conditional _____

Abutting property zoned _____

Variation order no: _____ Conditional order no: _____

Type of Lot:

- Interior
- Corner
- Reverse Corner
- Key
- Through
- Irregular Shape
- Farm
- Non-farm

Existing use/structures: _____

Proposed use/structures: _____

Lot Dimension: _____ Area of lot: _____

Size of Building: _____ No. of stories _____ No. of dwelling units: _____

Basement: Yes _____ No _____ Type: _____ Lane: _____

Note: All documents are required when submitting application. One week notice to review before permit may be issued.

DATE COMPLETED: _____

AUTHORIZED SIGNATURE: _____