



### Part 1

tel 250-475-5471 fax 250-475-5430  
www.saanich.ca

An application is submitted for one or more of the following:

- |  |  |
|--|--|
| <input type="checkbox"/> Rezoning/Bylaw Text Amendment | <input type="checkbox"/> Environmental Development Permit        |
| <input type="checkbox"/> OCP Amendment                 | <input type="checkbox"/> Streamside Development Permit           |
| <input type="checkbox"/> Development Permit            | <input type="checkbox"/> Streamside Development Permit Amendment |
| <input type="checkbox"/> Development Permit Amendment  | <input type="checkbox"/> Subdivision Application                 |
| <input type="checkbox"/> Development Variance Permit   | <input type="checkbox"/> Fire Hazard Development Permit          |

### Description of Property

Access No# \_\_\_\_\_

Civic Address \_\_\_\_\_ PID \_\_\_\_\_

Legal Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_ Range \_\_\_\_\_ Plan \_\_\_\_\_

### Contacts

Please print clearly.

#### Applicant

Company		Name	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

The undersigned owner/authorized agent of the owner makes an application as specified herein, and declares that the information submitted in support of the application is true and correct in all respects.

Applicant's Signature (required)	Date
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#### Owner

If the applicant is NOT the owner, complete "Owner's Authorization" form.

Company		Name	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

Any personal information provided in this application is collected for the purpose of administering the Local Government Act, and the bylaws of the municipality under the Local Government Act, and under the authority of those enactments. Questions about the collection of the information may be directed to the Freedom of Information Officer.

### Office Use Only

	Date	File No.
Received	Received By	Project No.
Required Documents		
Required Plans	Receipt No.	Fees \$