

SCHEDULE A.2

The Corporation of the Township of Spallumcheen
4144 Spallumcheen Way
Spallumcheen, BC
V0E 1B6

Application/File No. _____

APPLICATION FOR ZONING AMENDMENT

I/We hereby apply for: (✓ check where applicable)

_____ an amendment to the text of Zoning Bylaw No. _____

_____ the rezoning of the property described as:

(Legal Description): _____

and located at (Civic Address): _____

from _____ to _____

Required application fee and the completed Zoning Amendment Information Form are attached.

Date

Applicant's Signature

THIS APPLICATION IS MADE WITH MY FULL KNOWLEDGE AND CONSENT.

Date

Registered Owner's Signature

Where the applicant is NOT the REGISTERED OWNER, the Application must be signed by the REGISTERED OWNER, SOLICITOR, OR AGENT.

.....

FOR OFFICE USE ONLY:

Application fee of \$_____ received.

RECEIPT NO. _____

Date

Signature of Official

ZONING AMENDMENT INFORMATION FORM

THE INFORMATION REQUESTED IN THIS FORM IS REQUIRED TO EXPEDITE THE APPLICATION AND ASSIST STAFF IN PREPARING A RECOMMENDATION.

This form is to be completed in full and submitted with all requested information, Zoning Amendment Application, Application Fee and Certificate of State of Title or Indefeasible Title for the subject property.

(1) APPLICANT AND REGISTERED OWNER:

(a) Applicant's Name: _____
Address: _____
_____ Postal Code: _____
Telephone: Business: (_____) Home: (_____)
Fax: (_____) Email: _____

(b) Registered Owner's Name: _____
Address: _____
_____ Postal Code: _____
Telephone: Business: (_____) Home: (_____)

(c) A copy of a State of Title Certificate, or a copy of a Certificate of Indefeasible Title, dated no more than thirty (30) days prior to submission of the application, must accompany the application as a proof of ownership.

(1) APPLICATION FEE

Application Fee shall be made payable to the Township of Spallumcheen and shall accompany the Application.

(2) TEXT AMENDMENT

Describe the proposed text amendment: _____

SCHEDULE A.2 (Cont'd)...

(3) REZONING – PROPERTY TO BE REZONED

(a) Legal Description in full: _____

(b) Location (street address of property, general description, or map): _____

(c) Size of property (area, number of parcels): _____

(d) Present Zoning: _____

(e) Proposed Zoning: _____

(f) Description of Existing Use/Development: _____

(g) Description of the Proposed Use/Development (use separate sheet if necessary):

(h) Services currently existing or readily available to the property (check applicable areas):

<u>Services</u>	<u>Currently Existing</u>		<u>Readily Available(*)</u>	
	Yes	No	Yes	No
Road Access	_____	_____	_____	_____
Water Supply	_____	_____	_____	_____
Sewage Disposal	_____	_____	_____	_____
Hydro	_____	_____	_____	_____
Telephone	_____	_____	_____	_____
School Bus Service	_____	_____	_____	_____

* Readily Available means existing services can be easily extended to the subject property.

(a) Proposed Water Supply Method: _____

(b) Proposed Sewage Disposal Method: _____

(c) Approximate Commencement Date of Proposed Project: _____

SCHEDULE A.2 (cont'd)...

(1) REASONS IN SUPPORT OF APPLICATION

Reasons and comments in support of the application (use separate sheet if necessary):

(2) ATTACHMENTS

At the time of providing Application and Information Forms to the applicant, the Corporate Officer shall indicate which of the following attachments are required or not required for this Application. The Corporate Officer may also require additional information.

- (a) A dimensioned Sketch Plan drawn to a scale of _____ to _____ showing the parcel(s) or part of the parcel(s) to be redesignated and the location of existing buildings, structures and uses.

REQUIRED: Yes _____ No _____

- (b) A dimensioned Site Development Plan drawn to a scale of _____ to _____ showing the proposed use, buildings and structures, highway access, etc.

REQUIRED: Yes _____ No _____

- (c) A Contour Map (Plan) drawn to a scale of _____ to _____ with contour interval of _____ if warranted by the topographic condition of the subject site.

REQUIRED: Yes _____ No _____

- (d) A dimensioned Sketch Plan drawn to a scale of _____ to _____ of the proposed subdivision, where subdivision (small or large) is contemplated.

REQUIRED: Yes _____ No _____

- (e) Additional Information Required: _____

Date

Applicant's Signature

SCHEDULE A.2 (Cont'd)...

FOR OFFICE USE ONLY:

Forms duly completed, received:

Date

Signature of Official

Air Photo No. _____ Assessment Roll No. _____

Cadastral Map No. 82L/ _____

Affected by:

Agricultural Land Reserve Yes _____ No _____

Controlled Access Highway Yes _____ No _____

Major Road
(other than Controlled Access Highway) Yes _____ No _____

Referral Required to:

A.P.C. " _____ " Chairman Yes _____ No _____

Interior Health Yes _____ No _____

Ministry of Transportation, Kamloops Yes _____ No _____

Ministry of Transportation, Vernon Yes _____ No _____

Ministry of Environment Yes _____ No _____

Other: _____ Yes _____ No _____

Schedule "A.2" to accompany the "Township of Spallumcheen Community Plan & Zoning Amendment Procedures Bylaw No. 1158, 1991".

I hereby certify this to be a true and correct copy of Schedule "A.2" attached to and forming part of the Township of Spallumcheen Community Plan & Zoning Amendment Procedures Bylaw No. 1158, 1991, as amended from time to time.

Corporate Officer