

**OFFICIAL COMMUNITY
PLAN AMENDMENT
APPLICATION**



APPLICANT INFORMATION:

| | | | |
|-------------------|-------------------|------------------------------|-------------|
| Applicant Name | | Company Name (if applicable) | |
| Home Phone Number | Cell Phone Number | E-mail Address | |
| Mailing Address | | Province | Postal Code |

PROPERTY OWNER INFORMATION:

Check if Same as Applicant

| | | | |
|---------------------|-------------------|------------------------------|-------------|
| Property Owner Name | | Company Name (if applicable) | |
| Home Phone Number | Cell Phone Number | E-mail Address | |
| Mailing Address | | Province | Postal Code |

LEGAL LAND DESCRIPTION:

Quarter: _____ Section: _____ Township: _____ Range: _____ W2
 Lot: _____ Block: _____ Plan: _____ Extension: _____
 Civic Address: _____

AMENDMENT TYPE

Map Amendment Future Land Use Text Amendment Concept Plan

Section of the Bylaw: _____

Proposed Wording or intent: _____

Reasons for support of this application (include attachments as needed): _____

EXISTING DESIGNATION OF LAND INTENDED FOR DEVELOPMENT

Agriculture

Commercial/Mixed Use

Commercial – Light Industrial

Industrial

Employment Lands

Rural Residential

Peri-Urban Residential

Recreational

Other – Please Describe: _____

Current Land Use: _____

PROPOSED DESIGNATION OF LAND INTENDED FOR DEVELOPMENT

Agriculture

Commercial/Mixed Use

Commercial – Light Industrial

Industrial

Employment Lands

Rural Residential

Peri-Urban Residential

Recreational

Other – Please Describe: _____

Proposed Land Use: _____

I, _____ of _____
(Please Print Full Name) (Please Print City, Province)

in the province of Saskatchewan, solemnly declare that all the above statements within this application are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of *The Canada Evidence Act*.

I further agree to indemnify and hold harmless the Municipality from and against any claims, demands, liabilities, costs or damages pursuant to this application.

I further agree that _____ is appointed as the Agent regarding this application and has the
(Please Print Full Name)

authority to answer any questions or inquiries that may be directed to them, and they shall be provided information by the RM of Sherwood No. 159 regarding this application only. The Agent has my authorization to make decisions in their best judgment regarding this application.

I hereby authorize the RM of Sherwood No. 159 to enter my land for the purpose of conducting a site inspection regarding this application.

The information on this form is being collected under the authority of section 28(a) of the Freedom of Information and Protection of Privacy Act and will be used solely for the purpose of this application.

Applicant Signature Date Property Owner Signature Date