Township of Georgian Bluffs

Land Use Request Form

FEE: $50.00

Missing information may delay response or make it impossible to provide accurate or comprehensive information. ***It is the responsibility of the person making the request to provide all accurate information.***

Assessment Roll No. _____

Date of Request _____

Name _____

Address _____

Phone ( ) _____ Fax ( ) _____

Email _____

Circle one of the following

Owner Agent for Owner

If not owner – Owner's Name and contact information_____

_____

(owner will be forwarded a copy of the response)

Subject of Inquiry

Lot _____ Concession _____

Part _____ Plan _____

Former Township (please circle) Derby Keppel Sarawak

Civic Address_____

Type of Inquiry (please circle)

Building Zoning Severance Setbacks Municipal Water Miscellaneous

Brief Description of Inquiry

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Additional information/documents enclosed _____

Draw Site Plan here or attach, if additional space required. Include all building setbacks and dimensions.

Office Use Only: **Date Received** _____

Respondents Name _____

Assessment Map _____

Official Plan Designation _____

Policies _____

Zoning By-law No. _____ **Zone** _____
Policies _____

Zoning by-law Schedule (map) _____

Air Photo _____

Other matters which may impact: (ie. NEC, Wetland, etc.)/Building Info/Road Status/Water Supply Status

Comments: _____
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Date Signature