OCP/ZB Text Amendment Application

Applicant Name: _____ Date: _____

Email: _____ Phone #: _____

Mailing Address: _____

Legal Land Description - Lot: _____ Blk/Par: _____ Plan No.: _____ Ext.: _____

Quarter: _____ Section: _____ Township: _____ Range: _____ W2

1. Text Amendment Information

Amending Official Community Plan (OCP) or Zoning Bylaw (ZB): ☐ OCP ☐ ZB

OCP/ZB Section(s) to be Amended: _____ Fee Paid: ☐ Yes ☐ No

Description of Proposed Amendment: _____

2. Declaration

I, _____, solemnly declare that, to the best of my knowledge, all the statements contained within this application are true. 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*.

Furthermore, I understand that I am responsible for all costs associated with the proposed amendment, and more specifically, agree to pay for the cost of advertising the public notice in accordance with *The Planning and Development Act*, regardless of whether it is approved by the Ministry of Municipal Relations or the Council of the RM of Edenwold No. 158.

Signature: _____ Date: _____

Office Use Only

Date Received: _____

Fee Submitted: _____

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