

RM of Edenwold Landscaping Application



Name of applicant:

Contractor

Homeowner

Building Permit #: _____

Civic address of landscaping project: _____

Lot _____ Block _____ Plan _____

Contractor (If applicable)

Homeowner

Name _____

Name _____

Address _____

Address _____

Phone _____

Phone _____

Email _____

Email _____

Developer-Approved Landscaping Plan Submitted

Permission is hereby granted to _____ to complete
the landscaping at civic address _____ in accordance with all
developer and municipal regulations.

Signature of Applicant

Date

Development Officer

Date

Once lot grading and landscaping is complete, please call (306) 347-2965 to arrange an inspection.