

Application File No. _____ Received by: _____ Date: Received: _____ Complete: _____
Application Fee: \$ _____ Receipt No. _____
(Attach fee calculation Form 30 where necessary)

Shaded area for Office Use only



City of Pitt Meadows Development Application Form (FORM 10)

(Please Print)

APPLICANT/AGENT INFORMATION:

Name: _____ Property Owner: Yes No
Address: _____
Postal Code: _____ Phone Number: _____ Fax Number: _____
Email: _____

PROPERTY OWNER INFORMATION:

List legal name and address of all persons and or entities holding any sort of interest in the property which is the subject of the development application. Attach FORM 15 for additional property owner information.

Owner 1: Name: _____
Address: _____
Postal Code: _____ Phone Number: _____ Fax Number: _____
Email: _____

Owner 2: Name: _____
Address: _____
Postal Code: _____ Phone Number: _____ Fax Number: _____
Email: _____

SUBJECT PROPERTY(ies):

Provide the civic address and legal description of all property(ies) involved in the development application. Attach FORM 15 for additional properties.

Civic Address: _____
Legal Description: _____

APPLICATION TYPE:

 Please check all of those that apply.

- Zoning/Rezoning from: _____ to: _____
 O.C.P. Amendment from: _____ to: _____
 Restrictive Covenant Amendment/Discharge Agricultural Land Commission Regional Plan Amendment
 Land Use Contract Amendment/Discharge Development Permit Development Variance Permit
 Temporary Use Permit Heritage Application Board of Variance Appeal
 Subdivision (Preliminary Layout Approval) Number of Lots _____
 Other - Please specify _____

PROJECT DESCRIPTION:

(If applying for a Development Variance Permit or Board of Variance Appeal, please list all variances requested)

CERTIFICATION: This application is hereby made with my full knowledge and consent and I/we declare that all statement and support information contained herein is correct in all aspects. Attach FORM 15 for additional signatures.

Registered Owner's Name(s):

Print Name _____ Signature _____
Print Name _____ Signature _____

AGENT AUTHORIZATION: As Owner(s) of the lands described in this Application, I/we hereby authorize _____ to act as my/our agent in regard to this application and to be the only contact with City Development Service staff. I/we further declare that my/our Agent is hereby authorized to make necessary changes to this application and associated documents and plans. Attach FORM 15 for additional signatures.

Owner 1: Signature: _____ Date: _____

Owner 2: Signature: _____ Date: _____

APPLICATION SUBMISSION REQUIREMENTS CHECKLIST: (TO BE COMPLETED BY APPLICANT)

Note: All items listed are required at time of application submission. Incomplete application will not be accepted or may be returned to the applicant subject to the retention of an administrative fee for initial processing.

Type of Application	Required Items
Agricultural Land Commission (Exclusion, Non-Farm Use and Subdivision)	A, B, C, F, K
Board of Variance	A, B, C, F,
Development Permit	A, B, C, D, E, F, G, I, J
Development Variance Permit	A, B, C, F, E, G, I, J
Heritage Revitalization Agreement	A, B, C, I', J, M
Heritage Alteration Permit	A, B, C, I', J, M
Land Use Contract Amendment or Discharge	A, B, C, E, I', J
Land Use (Zoning) Bylaw Amendment	A, B, C, D, E, F, I', J
Liquor License or Gaming License	A, B, C
Official Community Plan Amendment	A, B, C, D
Regional District Plan Amendment	A, B, C, F
Restrictive Covenant Amendment or Discharge	A, B, C, F
Secondary Suite	A, B, C
Subdivision (in Urban Area)	A, B, C, E, H, J
(in ALR)	A, B, C, E, H, J, L
Temporary Use Permit (in Urban Area)	A, B, C, J
(in ALR)	A, B, C, J, L

Notes: * Please inquire with the City about the level of detail required for plans for this type of application.

	Check if Required	Check if provided	
A			Fully completed application form and checklist (Including Agent/Owner Authorization signatures, and Company Search, if necessary.)
B			Application Fee
C			Letter of Intent (Detailed description of proposal; Justification and trade-off for variance or ALR application; Assessment of compliance with OCP policies, character and design guidelines, and other applicable City policies.)
D			Smart Growth Checklist
E			Fully completed Contaminated Site Questionnaire
F			State of Title Certificate or Title Search (No older than five (5) business days. If property owned by a company, include a BC Company Search.)
G			Site Plans (Location of all buildings and structures, landscaping and parking)
H			Preliminary Lot Layout
I			Design and Character Information and Rationale (Building Elevations, Signage, Colour renderings/model, sample materials and colours, etc.)
J			Data Summary Sheet
K			Agricultural Land Commission "Application by Land Owner" (and required supporting documentation)
L			Agricultural Land Commission Approval Letter
M			Heritage Assessment

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City of Pitt Meadows Owner Information & Agent Authorization Form (FORM 15)

(Please Print)

AGENT AUTHORIZATION:

As the registered owner(s) of the hereinafter cited property, I/we hereby authorize the person(s) stated as follows to act as my/our agent in regard to this application and to be the only contact with City Development Services staff:

Name of Agent: _____
Company Name: _____
Address: _____
Postal Code: _____ Phone Number: _____ Fax Number: _____
Email: _____

INFORMATION ABOUT PROPERTY (ies):

Provide the civic address and legal description of all property(ies) involved in the development application. Attach additional sheets if necessary.

Property 1:
Civic Address: _____
Legal Description: _____

Property 2:
Civic Address: _____
Legal Description: _____

Property 3:
Civic Address: _____
Legal Description: _____

INFORMATION ABOUT OWNER(S):

Provide the name (s) as they appear on title of each property involved in the development application. Attach additional sheets if necessary.

Name: _____
Address: _____
Postal Code: _____
Phone Number: _____
Fax Number: _____

Name: _____
Address: _____
Postal Code: _____
Phone Number: _____
Fax Number: _____

Signature _____

Signature _____

Name: _____
Address: _____
Postal Code: _____
Phone Number: _____
Fax Number: _____

Name: _____
Address: _____
Postal Code: _____
Phone Number: _____
Fax Number: _____

Signature _____

Signature _____



City of Pitt Meadows Development Application Change Form (FORM 20)

(Please Print)

APPLICATION NUMBER:

City Application No.: _____

APPLICANT/AGENT INFORMATION:

Check here if same as on original application and skip to next section.

Name: _____ Property Owner: Yes No

Address: _____

Postal Code: _____ Phone Number: _____ Fax Number: _____

Email: _____

PROPOSED CHANGE(S):

No.	Currently Stated in Application:	Proposed Change:
____	_____	_____
____	_____	_____
____	_____	_____
____	_____	_____
____	_____	_____
____	_____	_____
____	_____	_____
____	_____	_____

CERTIFICATION: This application change is hereby made with the full knowledge of the property owner (s)..

Agent's Name(s):

Print Name

Signature

Print Date

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City of Pitt Meadows Development Application Fee Calculation Form (FORM 30)

**Check boxes
that apply**

**State required
application fee in
Bylaw No. 2253**

<input type="checkbox"/>	A.	Official Community Plan Application	\$ _____
<input type="checkbox"/>	B.	Rezoning Application	\$ _____
<input type="checkbox"/>		Public Hearing	\$ _____
<input type="checkbox"/>	C.	Land use Contract Amendment	\$ _____
<input type="checkbox"/>	D.	Regional Plan Amendment Application	\$ _____
<input type="checkbox"/>	E.	Heritage Bylaw Application	\$ _____
<input type="checkbox"/>	F.	Development Variance Permit Application	\$ _____
<input type="checkbox"/>		Development Permit Application	\$ _____
<input type="checkbox"/>		Temporary Use Permit Application	\$ _____
<input type="checkbox"/>		Heritage Alteration Permit Application	\$ _____
<input type="checkbox"/>	G.	Legal Document	\$ _____
<input type="checkbox"/>		Heritage Restrictive Covenant Application	\$ _____
<input type="checkbox"/>	H.	Subdivision (Preliminary Layout) Application	\$ _____
<input type="checkbox"/>		Final Plan Approval	\$ _____
<input type="checkbox"/>		Strata Forms	\$ _____
<input type="checkbox"/>	I.	Change to Application	\$ _____
<input type="checkbox"/>	J.	Board of Variance Appeal Application	\$ _____
<input type="checkbox"/>		Agriculture Application (City Fee)	\$ _____
<input type="checkbox"/>		Agriculture Application (ALC Fee)	\$ _____
TOTAL			\$ _____

Please make cheques payable to “The City of Pitt Meadows”

Note: Application fees subject to change. Refer to Development Services Fee Bylaw 2253 (as amended) for current fees and refund policy. Certain fees are not refundable.