

File No #: \_\_\_\_\_

Application Date: \_\_\_\_\_

**All of the information requested in the application and attached checklist is necessary to complete a thorough evaluation and timely decision on your application. All material submitted must be clear, legible, and precise; staff will only accept complete applications.**

**Type of amendment(s) being requested (please check all that apply):**

- Land Use Bylaw       Area Structure Plan       Area Redevelopment Plan  
 Intermunicipal Development Plan       Municipal Development Plan

**The Registered Owner(s) of the land, or a person authorized to act as an agent, must complete this form in its entirety.**

**I/We hereby make an application for an amendment in accordance with the plans and supporting information submitted herewith and which form part of the application.**

**Registered Owner of Land that is the subject of the proposed amendment(s):**

Landowner/Company Name(s): \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Applicant (if different from the Registered Owner):**

Contractor/Agent Name(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**LEGAL DESCRIPTION AND AREA OF LAND**

All/Part of the \_\_\_\_\_ ¼ sec. \_\_\_\_\_ twp \_\_\_\_\_ range \_\_\_\_\_ west of the fourth meridian,  
being all/part of:  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_  
Certificate of Title No.: \_\_\_\_\_  
Area of the parcel of land: \_\_\_\_\_ acres/hectares

**LOCATION OF LAND**

The land is located in the Town of Blackfalds:

- a) Is the land situated immediately adjacent to the municipal boundary?  
 No       Yes – What is the adjoining municipality? \_\_\_\_\_
- b) Is the land situated within 1.6 kilometers of the centre line of a highway?  
 No       Yes – What Highway No. is this? \_\_\_\_\_
- c) Does the parcel contain or is it bounded by a river, stream, lake, or other body of water, or by a drainage ditch or canal?  
 No       Yes – State the name: \_\_\_\_\_
- d) Is the parcel within 1.5 kilometers of a sour gas facility?  
 No       Yes

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**EXISTING AND PROPOSED USE OF LAND (Land Use Bylaw Amendment Only)**

- a) Describe the existing use of the land: \_\_\_\_\_
- b) Describe the proposed use of the land: \_\_\_\_\_
- c) The current land designation, as classified under the Land Use Bylaw is: \_\_\_\_\_
- d) The proposed land designation, as classified under the Land Use Bylaw is: \_\_\_\_\_

Explain, in detail, rationale for the Land Use Bylaw Amendment request:  
(further information may be provided and included on a separate sheet):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is the property the subject of a license, permit, approval, or other authorization granted by the Natural Resources Conservation Board, Energy Resources Conservation Board, Alberta Energy Regulator, Alberta Energy and Utilities Board or Alberta Utilities Commission?**       Yes       No

If yes, please describe: \_\_\_\_\_

**Is the property the subject of the application the subject of a license, permit, approval, or other authorization granted by the Minister or granted under any Act the Minister is responsible for under s.16 of the Government Organization Act\*?**       Yes       No

If yes, please describe: \_\_\_\_\_

**Is the subject property immediately adjacent to the County boundary?**       Yes       No

If yes, please describe: \_\_\_\_\_

\*The Minister is responsible for the following acts: AB Land Stewardship Act, Environmental Protection Act, Public Lands Act, Surveys Act, Water Act.

**RESOURCES:**

Water Act & Environmental Protection and Enhancement Act Approvals - **Alberta Energy Regulator:** <https://avw.alberta.ca/ApprovalViewer.aspx>  
 Historic Sites/Resources (requires an account) – **Online Permitting and Clearance (OPAC):** <https://www.opac.alberta.ca/Login.aspx>  
 Abandoned Wells – **Abandoned Well Map Viewer:** <https://extmapviewer.aer.ca/AERAbandonedWells/Index.html>  
 Pipeline/Well Locations – **Regulatory Assurance:** <https://regulatoryassurance.alberta.ca/dras?id=public-notice>

**REGISTERED OWNER(S) OR PERSON ACTING ON OWNER'S BEHALF**

I/We, \_\_\_\_\_, hereby certify that  
(please print full name(s))

- I/We are the registered owner(s), or
- I am the agent authorized to act on behalf of the registered owner

and that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application for a Land Use Bylaw Amendment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AGENT AUTHORIZATION (WHEN APPLICABLE)**

I/We, \_\_\_\_\_, being the registered  
(please print full name(s))

owner(s) of the land being subdivided do hereby authorize \_\_\_\_\_  
(individual or firm seeking application)

to make an application for a Land Use Bylaw Amendment affecting the above noted property.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**RIGHT TO ENTRY**

Pursuant to Sections 653(2) of the Municipal Government Act, I hereby  do, or  do not grant consent for a designated officer of the Town of Blackfalds to enter upon the land described above, when subject to an application for a Land Use Bylaw Amendment, for the purpose of a site inspection.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(please print full name)

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(please print full name)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT'S RATIONALE**

Please provide your rationale for requesting the proposed amendment. You may use the space below or prepare a separate statement and attach it to this application. This submission will be included in any reports presented to the Town of Blackfalds Municipal Planning Commission (MPC) and to City Council (attach additional pages if necessary).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BELOW FOR OFFICE USE ONLY**

Amendment Application Fee: (1-61-00-526)	\$
<b>TOTAL:</b>	\$

Receipt #: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Personal information collected on this application will be used in the evaluation of plans and to facilitate contact with referral agencies and adjacent landowners. The information is collected under the authority of the *Municipal Government Act* and the Land Use Bylaw currently in force, as well as Section 4(c) of the *Protection of Privacy Act* and will be protected under Part 1 of the *Protection of Privacy Act*. As mandated in the *Access to Information Act*, applicant names and the nature of permits issued may be made publicly available. Questions or concerns regarding the collection and/or use of this information may be directed to the Information Governance Coordinator at [access@blackfalds.ca](mailto:access@blackfalds.ca) or by phone at 403.885.6370.