

Project Address: _____

Access Code: _____

Date of Receipt of Completed Form: _____

Property Owner

Applicant

Name: _____

Paid

Address: _____

Phone: _____ **Fax:** _____

Fees

of Units x \$40.00 _____

Authorized Agent

Applicant

Name: _____

Paid

Address: _____

Phone: _____ **Fax:** _____

Legal Description

Plan _____

Block _____

Lot _____

Current Status of Building (eg. Under construction, Unoccupied, Occupied): _____

Was building constructed, or building permit issued prior to August 1, 1966? _____

Proposed Number of Units: _____

Proposed Status to Create: **No. of Condominium Units** _____

No. of Building Units _____

No. of Bareland Units _____

NOTE If this application is approved, the approval will be valid for a period of 12 months. An extension for good reason may be requested prior to the expiry of the 12 month period. If the application is approved, any condition(s) must be satisfied and the plan must be endorsed by the Planning Director or his designate within this 12 month period, or extension thereof.

The applicant is not excused from complying with the requirements of any Federal, Provincial or Municipal legislation or the conditions of any easement, covenant, building scheme or agreement affecting the building or land.

This is neither a Development Permit, a Building Permit, nor an Occupancy Permit.

I / We hereby make application for CONDOMINIUM CERTIFICATE under the provisions of the Condominium Property Act in accordance with the plans and supporting information submitted herewith and which form part of this application.

Signature: _____

Date: _____