Part 1 of 2



DEVELOPMENT SERVICES 1229 Esquimalt Road, Esquimalt, B.C., V9A 3P1 www.esquimalt.ca

Instructions: This application is to be used when the property to be subdivided is appropriately zoned. If rezoning is required, please use a Development Application

Please return the following to the Approving Officer

- Completed Application Form
- Certificate of Indefeasible Title
- $\hfill\square$ 2 copies of the proposed plan of subdivision at a scale of 1:500
- □ Subdivision Fee [make cheque payable to Corporation of the Township of Esquimalt]

Description of Property

Civic Address				PID					
Legal	Lot	Block	Section	Range	Pla	n			
Contacts	Ple	ase print clearly							
Applicant	Na	ame		Company					
	Ac	ldress			City				
	Er	Email				Postal Code			
	Pł	none	Cel			Fax			
Owner	Ap	Applicant's Signature (required)				Date			
Owner	N	ame			Company				
If the applicant is NOT owner, complete this section.									
	Ac	ldress				City			
	Er	Email					Postal Code		
	Pł	none	Cel			Fax			
	l he	I hereby consent to the application contained herein.							
	0	wner's Signature (requ	ired if applicant is not the		Date				
	An	v personal informa	ation provided in thi	s application is o	collected for the	nurnose o	f administering the Local		

Any personal information provided in this application is collected for the purpose of administering the <u>Local</u> <u>Government Act</u>, and the bylaws of the municipality under the <u>Local Government Act</u>, and under the authority of those enactments. Questions about the collection of the information may be directed to the Head of Freedom of Information Officer, 1229 Esquimalt Road, Esquimalt, BC V9A 3P1, 250-414-7135.

Development Details

Conventional S	Subdivision 🛛 Yes	Bare Land Strata	Development Permit Area	a 🛛 Yes 🔹 No			
Can the prope	rty be served by existi	ng utilities? 🛛 Yes 🛛 🔾	No				
Purpose of the	subdivision and prop	osed land use:					
Office Use Only	Examination Receipt #	Date	Initial				
	Approval Fee Receipt #	Date	Initial				
		n Application Circulo					
		Roll No:					
Address:	Legal I	Description:	PID:				
Comments	By:						
Building Inspec	ctor:						
				Date Initial			
Fire Chief:							
Engineer:				Date/Initial			
Parks [if applic				Date/Initial			
	CODIE].						
				Date/Initial			
Tax Collector:							
				5			
Planner:				Date/Initial			
				Date/Initial			
RETURN TO SUB	INSION APPROVING	OFFICER [Director of Deve					
Letter to Appli	cant:	_ Amount c	Amount of Approval Fee:				
Final Approval	l:	_ Date of A	pproval:				
SUBDIVISION Applic	cation						