



# APPLICATION BY LOCAL GOVERNMENT OR COMMISSION PROPOSAL

**TYPE OF APPLICATION** *(Check appropriate box)*

- EXCLUSION**  
under Sec. 29(1) of the Agricultural Land Commission Act
- INCLUSION**  
under Sec. 17(1) of the Agricultural Land Commission Act

R.D./Mun. File No. _____
Fee Receipt No. _____
Fee Amount _____
ALR Base Map No. _____
ALR Constituent Map No. _____
Air Photo No. _____

**APPLICANT**

\_\_\_\_\_

**LAND UNDER APPLICATION**

*(Show land on ALR map & legal plan and attach Certificate(s) of Title or Title Search Prints)*

Title Number	Size of Each Parcel (Ha.)

**PROPOSAL** *(Show on plan or sketch)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CURRENT USE OF LAND UNDER APPLICATION** *(Show information on plan or sketch)*

List uses and describe all buildings

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**USES ON ADJACENT LOTS** *(Show information on plan or sketch)*

North \_\_\_\_\_  
East \_\_\_\_\_  
South \_\_\_\_\_  
West \_\_\_\_\_

**LOCAL PLANNING** *(Attach relevant sections of bylaws)*

Community Plan or Rural Land Use Bylaw name and designation:

\_\_\_\_\_

Zoning Bylaw name and designation:

\_\_\_\_\_

Uses permitted: \_\_\_\_\_

Minimum lot size permitted: \_\_\_\_\_

Services available or scheduled:

Roads \_\_\_\_\_

Water \_\_\_\_\_

Sewage disposal \_\_\_\_\_

Others \_\_\_\_\_

**AUTHORIZATION, COMMENTS AND RECOMMENDATIONS** *(Include copies of resolutions)*

Resolution of Board or Council authorizing application:

\_\_\_\_\_

Comments and Recommendations:

Advisory Planning Commission \_\_\_\_\_

\_\_\_\_\_

Agriculture Advisory Committee \_\_\_\_\_

\_\_\_\_\_

Planning staff \_\_\_\_\_

\_\_\_\_\_

Others

\_\_\_\_\_

**REPORT OF PUBLIC HEARING**

Include a record of the hearing date, location, number attended, a synopsis of the comments and a copy of the Public Hearing notice. Also include any written submissions along with a photo of the sign posting on the property.

\_\_\_\_\_  
*Signature of Responsible Local Government Officer*

\_\_\_\_\_  
*Date*