

MINOR VARIANCE APPLICATION

THIS IS NOT AN APPROVAL

Ŀ	Applicant Name:			Company Name:		
APPLICANT	Mailing Address:	ſown/City		Province	Postal Code	
APF	Contact Number(s):		Email Address:			
	Home: Cell:					
			<u> </u>			
	Owner Name or Same as Applicant 🛛 Yes		Company N	lame:		
VER	Mailing Address:					
OWNER	Г	own/City		Province	Postal Code	
Ŭ	Contact Number(s):		Email Address:			
	Home: Cell:					
	Building Address:		Legal Description			
		Lot	Blo	ck/Parcel	Plan	
N	Reasons in support of Minor Variance Application: (Use additional pages if necessary)					
ΑΤΙΟ						
RM						
Reasons in support of Minor Variance Application: (Use additional pages if necessary)						
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	APPLICATION INFORMATION		Office Use			
	Application will not be processed if site plan is not attached.				Application Fee:	
	Site Plan Attached Ves Application will not be processed if Real Property Report or				Receipt No.:	
	Surveyor's Certificate is not provided.				Roll Number:	
Drawings Attached Yes 🗖				Comments:		
	Vacant Property n/a 🗖					
Non-refundable \$100.00 Application Fee Enclosed 🛛 Yes						

I hereby comply with the Building & Zoning Bylaw of the Town of Rosthern and acknowledge that it is my responsibility to ensure compliance with these and any other applicable bylaws, Provincial Acts & Regulations regardless of any plan review or inspections that may or may not be carried out by the Town or Rosthern or its authorized representative. I agree to do all construction work solely in accordance & compliance with the information & plans provided by me in this application, & will obtain all other work permits required in conjunction with my development. I hereby declare that the above information is true and correct.