



# Subdivision Application

**Foothills County**  
309 Macleod Trail, Box 5605, High River, AB T1V 1M7 • Tel: 403-652-2341 Fax: 403-652-7880

**www.foothillscountyab.ca**

***This form is to be completed in full wherever applicable by the registered owners of the land that is the subject of the application or by a person authorized to act on the registered owner’s behalf.***

FOR OFFICIAL USE ONLY

Date of Receipt: \_\_\_\_\_

Date Deemed Complete: \_\_\_\_\_

Roll #: \_\_\_\_\_

Fees Submitted: \_\_\_\_\_

Receipt No.: \_\_\_\_\_

File No.: \_\_\_\_\_

**1. NAME OF REGISTERED OWNERS OF LAND TO BE SUBDIVIDED:**

\_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

I consent to receive documents by email: ☐ Yes ☐ No Email Address: \_\_\_\_\_

**2. NAME OF AUTHORIZED PERSON ACTING ON BEHALF OF REGISTERED OWNER(S) (IF ANY):**

\_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

I consent to receive documents by email: ☐ Yes ☐ No Email Address: \_\_\_\_\_

I (We) \_\_\_\_\_ hereby authorize \_\_\_\_\_

to act on my (our) behalf on matters pertaining to this application for subdivision.

\_\_\_\_\_

Signature of Landowner(s) \_\_\_\_\_ Date \_\_\_\_\_ Signature of Landowner(s) \_\_\_\_\_ Date \_\_\_\_\_

**3. LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED:**

All/part of the \_\_\_\_\_ 1/4 Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Range \_\_\_\_\_ West of \_\_\_\_\_ Meridian.

Being all/parts of Lot \_\_\_\_\_ Block \_\_\_\_\_ Reg. Plan No. \_\_\_\_\_ C.O.T. No. \_\_\_\_\_

Total area of the above parcel of land to be subdivided \_\_\_\_\_ hectares ( \_\_\_\_\_ acres).

Municipal Address (if applicable) \_\_\_\_\_

**4. LOCATION OF LAND TO BE SUBDIVIDED:**

a. The land is situated in Foothills County.

b. Is the land situated immediately adjacent to the municipal boundary? Yes \_\_\_\_\_ No \_\_\_\_\_

If **Yes**, the adjoining municipality is \_\_\_\_\_

c. Is the land situated within 1.6 kilometres (1 mile) of the centre line of a Highway right of way?

Yes \_\_\_\_\_ No \_\_\_\_\_ If **Yes**, the Highway is No. \_\_\_\_\_.

d. Does the proposed parcel contain or is adjacent to a river, stream, lake or other body of water, or by a drainage ditch or canal? Yes \_\_\_\_\_ No \_\_\_\_\_ If **Yes**, state its name \_\_\_\_\_

e. Is the land within 1.5 kilometres (0.93 miles) of a sour gas facility? Yes \_\_\_\_\_ No \_\_\_\_\_

f. Are there any oil or gas wells or pipelines on or within 100 metres of the land? Yes \_\_\_\_\_ No \_\_\_\_\_

**5. EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED:**

a. Describe existing use of the land as classified under a land use bylaw \_\_\_\_\_

b. Describe proposed use of the land as classified under a land use bylaw \_\_\_\_\_

c. Number of new parcels being created \_\_\_\_\_

d. Size of parcels being created \_\_\_\_\_

6. PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED:

- a. Describe the nature of the topography of the land (flat, rolling, steep, mixed)
- b. Describe the nature of the vegetation and water on the land (brush, shrubs, tree stands, woodlots, sloughs, creeks, etc.)
- c. Describe the kind of soil on the land (sandy, loam, clay, etc.)

7. EXISTING BUILDINGS ON THE LAND TO BE SUBDIVIDED:

Describe any building, historical or otherwise and any structures on the land and whether they are to be demolished or moved:

8. WATER AND SEWER SERVICES

If the proposed subdivision is to be served by other than a water distribution system and a wastewater collection system, describe the manner of providing water and sewage disposal:

9. REGISTERED OWNER(S) OR PERSON ACTING ON HIS /HER BEHALF:

I/We, hereby certify that

☐ I/We are the registered owner(s), or

☐ I/We are authorized to act on behalf of the registered owner(s)

and that the information given on this form is full and complete and is, to the best of my/our knowledge, a true statement of the facts relating to this application for subdivision.

Address

Signed

Date: Phone No.

RIGHT OF ENTRY

I/We, hereby authorize Foothills County to enter my/our land for the purpose of conducting a site inspection in connection with my/our application for subdivision. This right is granted pursuant to Section 653(2) of the Municipal Government Act.

Signature of Registered Owner(s)

THIS SECTION FOR OFFICIAL USE

Decision

The reasons for refusal or conditions of approval are attached.

Date

Signed

(Authorized Officer of Approving Authority)

DISCLAIMER: Please note that the personal information collected on this form is authorized under the Municipal Government Act and is required for the purpose of the County's Planning and Development processes. This information may also be shared with appropriate government agencies and may also be kept on file by those agencies. The application and related file contents will become available to the public and are subject to the provisions of the Freedom of Information and Protection of Privacy Act (FOIP). If you have any questions about the collection and use of this information, please contact the FOIP Coordinator at 403-652-2341.