



Boundary Adjustment - Subdivision Application

Foothills County

www.foothillscountyab.ca

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

This form is to be completed in full wherever applicable by the registered owner(s) 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 OWNER(S) OF LAND TO BE SUBDIVIDED _____

Address _____ Postal Code _____

Home Phone _____ Business Phone _____

I consent to receive documents by email: Yes No Email Address: _____

NAME OF REGISTERED OWNER(S) 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:

1. 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) _____

2. 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. Size of parcels being created _____
- d. Description of Boundary Adjustment _____

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 _____

Phone No. _____ Date _____

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.