Application for Amendment to Land Use Bylaw

Foothills County **www.foothillscountyab.ca**
309 Macleod Trail, Box 5605, High River, AB T1V 1M7 • Tel: 403-652-2341 Fax: 403-652-7880
Email: planning@foothillscountyab.ca

Note: An Application Fee of $ 1600.00 shall accompany this application.

Date Received: May 20, 2026 Receipt No. 459098

THIS SECTION TO BE COMPLETED IN FULL BY THE APPLICANT

I, Steven William SKory
Name of Registered Owner (please print)

hereby certify that I am the registered owner of the land described above and authorize

_____ to act as agent in the matter.
Name of Agent (please print)

PLEASE ACCEPT THIS APPLICATION REGARDING LEGAL LAND DESCRIPTION

All/part of the NW 1/4 sec. 9 twp. 18 range 29 west of W4 meridian.

Being all parts of lot _____ block _____ Reg. Plan No. _____ C.O.T. No. _____

TO: (Choose One)

☒ Redesignate from farm to acerage

☐ Amend the Land use Bylaw by _____

Size of existing parcel(s) 160 +/- Size of proposed parcel(s) 14 acres +/-

The reasons for the (redesignation) (amendment) are as follows:

in order to sell acerage (incl. residence) so we can relocate. Gas well was drilled - never actively produced.

I certify that the information given on this form and attachment hereto are full and complete and is to the best of my knowledge a true statement of the facts concerning this application and I am the registered owner and/or the duly authorized agent.

Date Jan 26 / 24 Signed [redacted]

Landowner Information

Phone No. [redacted]

Address: [redacted] High River T1V-1P6

I consent to receive documents by email: ✓ Yes ___ No

Email Address: [redacted]

Agent Information

Phone No. _____

Address: _____

I consent to receive documents by email: ___ Yes ___ No

Email Address: _____

Right of Entry

I, being the owner or person in possession of the above described land and any buildings thereon consent to an authorized person designated by Foothills County to enter upon the land for [redacted] processing of this application.

Jan 26 / 24 [redacted]
Date Signature

Is there an access or safety concern with respect to a site inspection: ___ Yes ✓ No

If yes, please clarify:

_____

_____

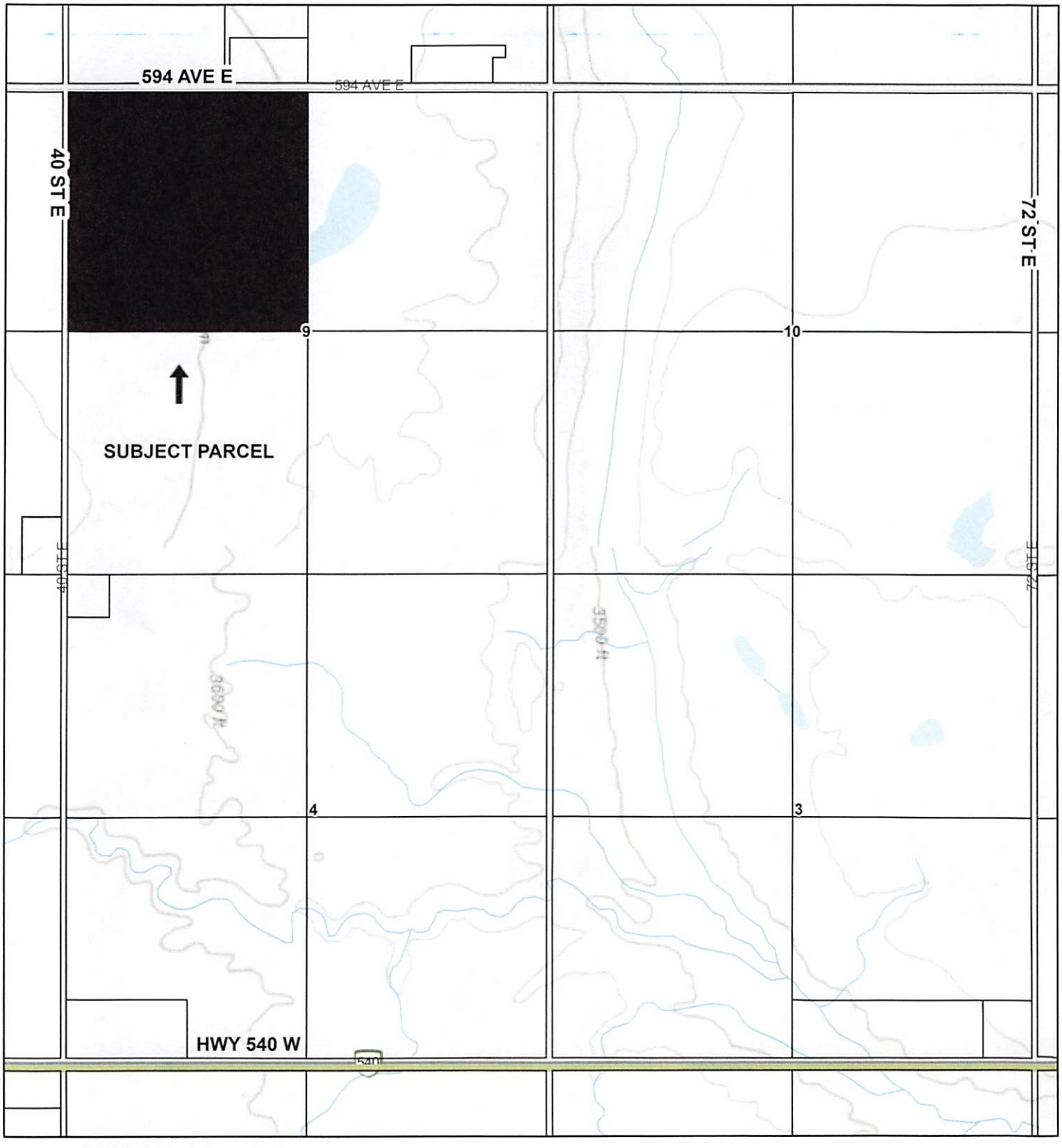
_____

***Important Note: Applications must be received with original signed signature. Photocopies, faxes and emails will not be accepted.**

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 Municipal Planner at 403-652-2341.

05/19

Location Map NW 09-18-29 W4M



2026-06-04, 2:24:25 p.m.

1:29,102

0 0.15 0.3 0.6 mi

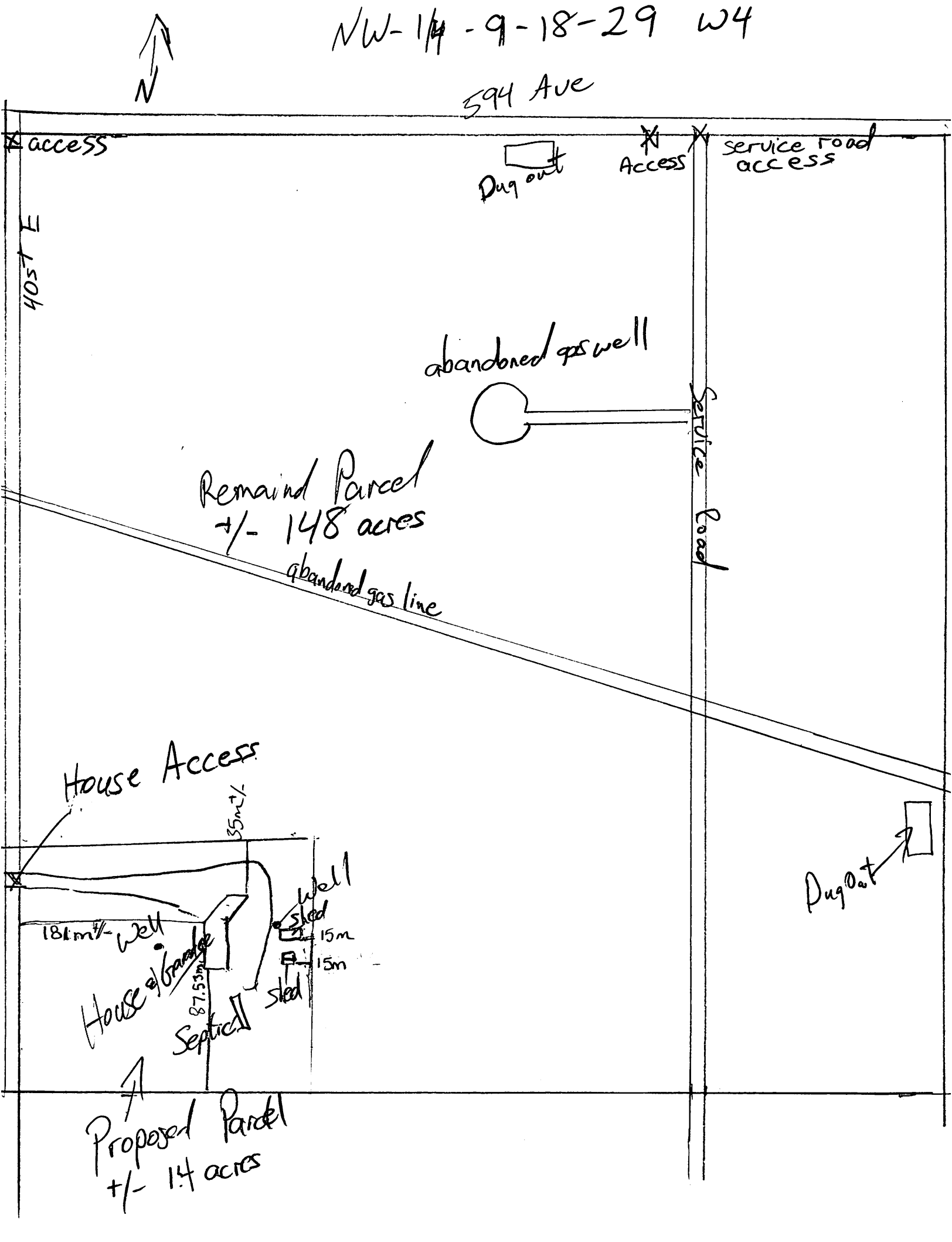
0 0.25 0.5 1 km

Parcels

Townships

Canada_Hillshade

Sources: NRCan, Esri Canada, and Canadian Community Maps contributors.


NW-1/4-9-18-29 W4
N
594 Ave
access
Dug out
Access
service road access
40st E
abandoned gas well
Service Road
Remaind Parcel
+/- 148 acres
abandoned gas line
House Access
35m+/-
Well
sled
15m
15m
181m+/- Well
House & Garage
87.53m
Septic
sled
Dug Out
Proposed Parcel
+/- 1.4 acres