



FORM A
Application to
Subdivide Land
 Under the Planning and
 Development Act, 2007

Planning & Growth Development
 177 1st Ave NE, PO Box 340
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For Official Use
 Date of Receipt of Completed Form A

 File No. _____
 Fees Submitted: _____

Please complete application in
 black ink or type

1. Location of Land to be Subdivided

1/4 Sec.	TWP	RGE	MER
Lot (s)	Block (s)	Reg'd Plan No.	

2. Intended Subdivision is shown on enclosed:

- Plan of Proposed Subdivision or;
- Sketch Plan and
- Written Legal Description

3. Legal and Physical Access from the Subdivision is:

- Urban Street
- Road Allowance
- Highway

4. Existing and Proposed use of land to be subdivided:

- A) Existing: _____
 B) Proposed: _____

5. Services Required:

- Sewer
- Water
- Electrical Power
- Telephone
- Natural Gas
- Cable
- Storm Drainage
- Other

6. Additional information supporting the proposed subdivision
 (Please use attachments if necessary)

7. Municipal Reserve: Yes ____ No ____
 Amount (in lieu): _____ or land area to be transferred _____
 Provided: Yes ____ No ____
- Buffer Strips: Yes ____ No ____
 Provided: Yes ____ No ____
- Rights-of-way dedicated: Yes ____ No ____

8 Development Levies to be provided: \$ _____
Fees Paid: Yes _____ No _____

A) Name of Registered Owner of land to be subdivided:

Name: _____
Address: _____
Telephone: _____
e-mail: _____

B) Land Surveyor/Planner/Lawyer/Agent:

Name: _____
Address: _____
Telephone: _____
e-mail: _____

C) Registered owner:

I, _____, hereby certify
(full name in block letters)
that I am the registered owner of the land proposed for subdivision.

Name: _____
Address: _____
Telephone: _____
e-mail: _____

D) Authorized Agent/Applicant: **** Attached is the Letter of Authorization from the legal or beneficial owner. ****

I am authorized to act on behalf of the registered owner and that all the above statements contained within the application are true, and I make this solemn declaration conscientiously believing to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.

Name: _____

Address: _____

Signature: _____

Telephone: _____

REPLIES ARE TO BE SENT TO: A _____

B _____

C _____

D _____