



Development Services
 301-515 Hwy 97 South
 Kelowna, BC V1Z 3J2
 p 250 769 4999
 f 250 769 4377

Development Permit Application

File #		Fees \$		Date received		Receipt #	
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(the above is to be completed by staff)

APPLICANT INFORMATION

Development Primary Contact:

First Name:	
Last Name:	
Company Name (if applicable):	
Mailing Address:	
City:	Postal Code:
Primary Contact No.:	Secondary Contact No.:
Email / Fax:	

Owner (Registered Lessee or CP Holder):

First Name:	
Last Name:	
Company Name (if applicable):	
Mailing Address:	
City:	Postal Code:
Primary Contact No.:	Secondary Contact No.:
Email / Fax:	

Note: *If the applicant is not the registered Lessee / CP Holder, the registered Lessee / CP Holder must complete the right column and sign the application; a supplemental Letter of Authorization is strongly recommended.*

SITE DESCRIPTION

Lot No.:	Plan No.:	Reserve No.
Civic Address:	Business Licence No.	
Current Zoning:	Current Land Use:	

STATEMENT OF RATIONALE

Please describe the rationale for your development proposal. It is recommended that an additional letter of rationale be attached to and submitted along with the application.

DEVELOPMENT PROPOSAL

If any variances are proposed, a Development Variance Permit must be submitted with this application.

Type (e.g. single family, duplex):	Number of Units:	Building Area:
Height:	Number of Storeys:	Parcel Size:
Variances if any proposed:		

COORDINATING PROFESSIONALS

List any consultants known to date (e.g. engineers, architects, biologists etc.)

Name:	
Title:	
Company Name:	
Company Address:	
Phone:	Cell:
Email / Fax:	

Name:	
Title:	
Company Name:	
Company Address:	
Phone:	Cell:
Email / Fax:	

OTHER APPLICATIONS BEING SUBMITTED CONCURRENTLY

Type of Application:

APPLICANT ACKNOWLEDGEMENT

By signing this application form, the Applicant attests that the information provided on this and all supplemental application forms is true and correct to the best of their knowledge. Any material falsehood or any omission of a material fact made by the Applicant with respect to this application may result in an issued permit becoming null and void.

I, the Applicant, certify that this application is being made with the full knowledge and consent of all interest holders of the property in question.

Applicant (Print Name)

Applicant Signature

Date

Owner (Print Name)

Owner Signature

Date

Note: *If the applicant is not the registered Owner (Lessee or CP Holder) of the subject property, a signature from the registered Owner is required on this application. Acceptance of fees does not imply or guarantee application approval. Application fees are non-refundable.*