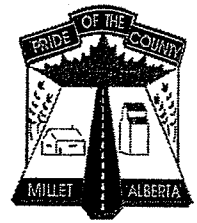


Town of Millet
 Box 270
 Millet, AB T0C 1Z0
 P: (780) 387-4554
 F: (780) 387-4459



Development Permit Application

Project Address: _____
 Project Number: _____ Application Date: _____
yy/mm/dd

Roll Number: _____ Lot: _____ Block: _____ Plan: _____

Owner Name: _____	Contractor Name: _____
Address: _____	Address: _____
City/Postal Code: _____	City/Postal Code: _____
Telephone: _____	Telephone: _____
Cell: _____ Fax: _____	Cell: _____ Fax: _____
Email: _____	Email: _____

Existing Development: _____

Proposed Development: _____

Land Use Zoning: _____ Development Agreement: YES NO

Permitted Use: _____ Discretionary Use: YES NO

Estimated Project Value: _____

Development Start Date: _____ Estimated Completion Date: _____
yy/mm/dd yy/mm/dd

Construct a New Building	Commercial Site Improvement	
Change in use of an Existing Building	Change in use of Land/Parking Area	
Change in use of a Commercial Retail Space	Demolition	
Accessory use of Residence	Variance for "As Built"	
Addition to an Existing Building	Outdoor Swimming Pool	
Alteration to an Existing Building	Demolition/Site Remediation	
Alteration/Change in use to an Existing Building	Electrical Power or Telecommunication	
Prefabricated Building	Other:	

Property Setbacks: Metric (Imperial)
 North: _____ East: _____ South: _____ West: _____
 Development Length (N/S): _____ Development Width (E/W): _____
 Development Height: _____ Lot Area: _____
 Development Coverage (%): _____ Number of Parking Stalls: _____
 Parking Stalls Required: _____

Application Fee: _____ Off-site Levies: _____ Damage Deposit: _____

Total Fees Due: _____

Applicant Signature: _____