



## SUBDIVISION APPLICATION

### TOWN OF COCHRANE PLANNING SERVICES

101 RANCHEHOUSE ROAD

COCHRANE, AB T4C 2K8

TEL: 403-851-2570

Email: [planning@cochrane.ca](mailto:planning@cochrane.ca)

#### FOR OFFICE USE

SD No. \_\_\_\_\_

Fee: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Receipt No. \_\_\_\_\_

**This Form is to be completed in full, wherever applicable, by the registered owner of the land that is the subject of the application, or by a person authorized to act on behalf of the registered owner.**

#### 1. Registered Owner of Lands to be Subdivided:

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Prov/Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### 2. Name of Agent (person authorized to act on behalf of the registered owner), if any:

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Prov/Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### 3. Legal Description and Area of Land to be Subdivided:

All/ Part of: \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_, West of the \_\_\_\_\_ Meridian

Being all/parts of Lot(s) \_\_\_\_\_, Block \_\_\_\_\_, Plan \_\_\_\_\_, C. of T. No. \_\_\_\_\_

Total area of the parcel: \_\_\_\_\_ hectares (\_\_\_\_\_ acres)

Municipal Address (if applicable): \_\_\_\_\_

Yes

No

Is the land situated immediately adjacent to a municipal boundary? If so, which one?

Yes No	Is the land situated within 1.6km of the centre line of a highway right-of-way? If so, which one?
Yes No	Does the proposed parcel contain or is it adjacent to a river, stream, lake, or other body of water or by a drainage ditch or canal? If yes, state its name:
Yes No	Is the proposed parcel within 1.5 kilometres of a sour gas facility?
Yes No	Does the parent parcel contain, or is it adjacent to an oil and gas facility (i.e. pipeline, abandoned well)? If yes, please describe:

<b>4. Proposal</b>
Existing Use of the Land:
Proposed Use of the Land:
Designated Land Use under the Land Use Bylaw:
Please provide any other details of the proposal:

<b>5. Physical Characteristics of Land to be Subdivided:</b>
Describe the nature of the topography of the land (flat, rolling, steep, mixed):
Describe the nature of the vegetation and water on the land (brush, shrubs, tree stands, woodlots, etc., sloughs, creeks, etc.):
Describe the kind of soil on the land (sandy, loam, clay, etc):
Describe any buildings and any structures on the land and whether they are to be demolished or moved:

<b>6. Water and Sewer Services:</b>
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:

<b>7. Confirmation</b>
I, _____, hereby certify that as the registered owner, or agent authorized to act as the registered owner, the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application for subdivision.

Name (print):  Signature of Owner/ Authorized Agent:	Date:
Name (print):  Signature of Owner/ Authorized Agent:	Date:

8. Right of Entry:	
I/We, being the registered owner(s) or person(s) in possession of the herein land and building(s) thereon, hereby consent to an authorized person designated by the Town of Cochrane entering upon the said property for the purpose of inspection during the processing of this application.	
Name (print):  Signature of Owner/ Authorized Agent:	Date:
Name (print):  Signature of Owner/ Authorized Agent:	Date:

9. Consent to Electronic Process:	
I/We, the landowner or agency acting on the landowner's behalf, consent to the use of the Town's electronic process, which includes electronic documents, stamps, and signatures.	<div>Yes</div> <div>No</div>

Compliance with the requirements of Land Use Bylaw 01/2022 does not afford relief from compliance with the *Municipal Government Act* or any other federal, provincial, or municipal legislation, or the conditions of any easement, covenant, building scheme, or agreement affecting the lands or buildings.

FOIP Notification: The personal information requested on this form is collected under the authority of the *Municipal Government Act*, Section 640, and the *Alberta Freedom of Information and Protection of Privacy (FOIP) Act*, Section 33(c) and is protected under Part 2 of that Act. Information collected by public bodies forms part of a file that may be available to the public. Please be advised that the information collected is used for processing this application, ensuring compliance with planning policies, and may be used to conduct ongoing evaluations of services received by the Town of Cochrane. Questions about this collection can be submitted to: FOIP Coordinator, 2nd Floor, 101 Ranchehouse Road, T4C 2K8, 403-932-2674 or FOIP@cochrane.ca

#### Questions?

Please do not hesitate to contact planning staff at [planning@cochrane.ca](mailto:planning@cochrane.ca) or 403-851-2570