

## Land Use Bylaw Amendment Application Form

Application No.: APPN Bylaw No.:								
		OFFICE	USE ONLY					
Application Fee:			•	Receipt No.:		Existing Land Use District:		
Date Received:	Rec'd By:	Deemed Complete:	: DC By:					
I/We hereby make application to amend the Town of Westlock Land Use Bylaw:								
APPLICANT/LANDOW	NER INFORMAT	ION						
Applicant Name:			Registered Ov	wner Name(s):	(If differe	ent from Applicant)		
Mailing Address:	Mailing Address:							
City:	Province:	Postal Code:	City:	City:		Postal (	Code:	
Phone:	Cell:	Cell:		Phone:		Cell:		
Email:			Email:	Email:				
LAND/PROPERTY INF	ORMATION							
Municipal Address		Roll Number						
Lot:	Block	Plan		Section	Township	Range Meridian		
PROPOSED AMENDMENT								
Redistricting	2141		│	Text Amendment				
Existing Land Use District:			+	Section(s) to be amended:				
Proposed Land Use District:	1							
Reasons in support of proposed amendment(s):								
SIGNATURE								
I/We understand that by making this application, I/We may be required to pay on demand all expenses by the Town in processing the proposed amendment wheter it is enacted or not, including but not limited to map printing or reproduction costs, surveying, and advertising costs.								
I/We understand that an app process involves mandatory p	olication to amend the	Town's Land Use Bylaw v	will be presented	to the Town of W	Westlock Council	•	tion. This	
Applicant Signature Pro			pperty Owner Signature					
Print Name			rint Name					