



**Application for Commercial/Industrial/  
Public & Institutional Development**

**Planning and Economic Development**

A-4900 50<sup>th</sup> St.  
Taber, Alberta T1G 1T1  
Phone:403-223-6009  
Fax: 403-223-5530

Office Use Only			
Use: <input type="checkbox"/> Permitted <input type="checkbox"/> Discretionary <input type="checkbox"/> Prohibited		Land Use District:	Roll No:
Development Permit No:	DP Fee:	Off-Site Levy:	Security Deposit:
Building Permit No:	BP Fee:	SCC Levy:	Total Fees:
Application Received:	Date Advertised:	Permit Effective:	

- **Development Permit** – ensures the use, setbacks, and size of your project comply with the *Land Use Bylaw*.
- **Building Permit** – ensures that your project is completed safely and is a requirement of the *Safety Codes Act*.
- **It is recommended you review *Land Use Bylaw* requirements prior to submitting an application.**
- **A building permit is required for most major construction projects and an application should be submitted with your development permit when applicable.**
- **Electrical, gas, and plumbing permits can be obtained through Superior Safety Codes (403-320-0734).**
- **During construction it is your responsibility to contact the building inspector for required inspections.**
- **After the building inspector has reviewed your plans and issued a building permit you can begin construction.**
- **At the completion of the project, you will be required to update your *Real Property Report* to verify the project has been constructed in the correct location.**
- **Please attach the following:**
  - Site Plan (3 copies)
  - Plot Plan (3 copies)
  - Internal circulation/parking plan (3 copies)
  - Building Plan (3 copies)
  - Building Permit Application
  - Security Deposit (if applicable)
- **Please indicate if you will be applying for:**
  - Building Permit Application
  - Business License

I/We hereby make application for a commercial/industrial/public & institutional development permit under the provisions of Land Use Bylaw 14-2016 in accordance with the plans and supporting information submitted herewith and which forms part of this application.

<b>Municipal Address:</b>			
<b>Legal Description of property to be developed:</b>			
Lot (Parcel):		Block:	Plan:
<b>Applicant:</b>	Name:		Email:
	Address:		
	Town:		Postal Code:
	Phone Res:		Phone Cell:
	Business License#:		
	Interest in the proposed development, if not the registered owner: <input type="checkbox"/> Agent <input type="checkbox"/> Contractor <input type="checkbox"/> Tenant <input type="checkbox"/> Other explain:		
<b>Registered Owner: (if different than applicant)</b>	Name:		Email:
	Address:		
	Town:		Postal Code:
	Phone Res:		Phone Cell:
<b>Type of Development Proposed:</b> <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Public and Institutional			
<input type="checkbox"/> New Construction <input type="checkbox"/> Waiver <input type="checkbox"/> Change of Use <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> Moved in Building <input type="checkbox"/> Other explain:			
<b>Adjacent to Highway:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Estimated Cost of Development:</b>	
<b>Lot Dimensions</b>		Width:	Depth:
<b>Lot Coverage</b>		Area:	
<b>Proposed setback from property lines:</b>		By proposed build (%):	Total site coverage (%):
<b>Additional Information</b>		Landscaped open space (%):	
Front:		Side 1:	Side 2:
Number of Units:		Number of Loading Spaces:	
Number of Off-Street Parking Spaces:		Driveway Width:	

*The personal information on this form is being collected for the purpose of reviewing your application to the municipality of the Town of Taber. The information is collected under the authority of section 146 of the Municipal Government Act (MGA) and section 33 of the Freedom of Information and Protection of Privacy Act. Under section 33 of the FOIPPA, the Town of Taber reserves the right to collect information that relates directly to and is necessary for an operating program or activity of the public body. Names of applicants will be provided to the public. If you have any questions about the collection of this information, please contact the FOIPPA Coordinator at 403-223-5500 ext 5519.*

<b>Business Information</b>	On-Site Off-Site/Mobile	Yes <input type="checkbox"/> No <input type="checkbox"/>	Proposed Signs: (Identify on site plan)	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Outdoor Storage: (Identify on site plan)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Proposed Outdoor Lighting: (Identify on site plan)	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Flammable or Hazardous material on site:	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, attach a list of all materials and estimated quantities.	
	Potential environmental impacts or nuisance effects:	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, attach a description of potential impacts and their proposed mitigation plan	

<b>Access:</b>	Existing	Proposed	N/A
Provincial Highway # _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Municipal Road	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal Subdivision Road	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Undeveloped Road Allowance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private Road (i.e. Condominium)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Services:</b>		Existing	Proposed	N/A
<b>Water Supply</b>	Municipally owned and operated piped water system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sewage Disposal</b>	Municipally owned and operated sanitary sewer system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Storm Drainage</b>	Municipal sewers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Ditches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Swales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If development is temporary, state for what period:** \_\_\_\_\_

**Existing Use of Site:**  
List existing buildings, structures and use(s) of the land and whether any are to be removed or relocated.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Proposed Use of Site:**  
Describe in detail - attach additional information if necessary.

\_\_\_\_\_

\_\_\_\_\_

**Present Use of Adjacent Properties**

\_\_\_\_\_

\_\_\_\_\_

**Describe how vehicles will access the site:**  
(submit an internal circulation/parking plan)

\_\_\_\_\_

\_\_\_\_\_

**Describe the use, number, and size of all commercial vehicles accessing the site:**

\_\_\_\_\_

\_\_\_\_\_

**Signed:** \_\_\_\_\_  
Applicant

**Date:** \_\_\_\_\_

**Signed:** \_\_\_\_\_  
Registered Owner (If different than applicant)

**Date:** \_\_\_\_\_

**Signed:** \_\_\_\_\_  
Development Officer

**Date:** \_\_\_\_\_