



# DEVELOPMENT PERMIT APPLICATION

For Office Use Only	
Date of Receipt:	_____
Accepted By:	_____
Permit #:	_____
Roll #:	_____
	_____

I / We hereby make application under the current Brazeau County Land Use Bylaw for a Development Permit. The plans and information submitted herewith are for this Application.

1. **Purpose of the Development Permit Application.** Using the table below, please check all items that apply to your proposed development and fill out the corresponding sections of the Permit Application form.

Type of Application	Application Sections to Complete
<b>Sections in green text MUST be completed</b>	<b>1, 2, 3, 12, 13, 14, 15</b>
<input type="checkbox"/> Construction/Placement of Building(s) or Structure(s)	4
<input type="checkbox"/> Variance Required (please discuss with planning staff when submitting your application)	4, 5
<b>THE FOLLOWING SECTIONS ONLY NEED TO BE COMPLETED IF THEY APPLY TO YOUR DEVELOPMENT:</b>	
<input type="checkbox"/> Demolition or Removal of Building(s) or Structure(s)	6
<input type="checkbox"/> Site Grading	7
<input type="checkbox"/> Home Occupations	8, 9 (4 & 10 – if required)
<input type="checkbox"/> Operation of a Business	8 (4 & 10 – if required)
<input type="checkbox"/> Natural Resources Extraction & Processing (NREP) - Gravel Pits	10 (11 – if required)
<input type="checkbox"/> Sign Installation	11
If the information cannot fit in the space provided, please provide it on a separate page(s). When doing so, please note which section each additional page corresponds to.	

2. **Contact Information**

**Name(s) and mailing address of ALL landowner(s)** – ensure all owners registered on title are indicated

	Email: _____
Mailing Address: _____	Phone: _____
P/C	Cell: _____
	Fax: _____

**Name(s) and mailing address of the applicant(s)**  Please check if same as landowner

	Email: _____
Mailing Address: _____	Phone: _____
P/C	Cell: _____
	Fax: _____

3. **Legal Description, Area and Land Use Details of the Lands to be Developed**

a. All/part of the \_\_\_\_\_ W5M

$\frac{1}{4}$  Section
Section
Township
Range

b. All/part of \_\_\_\_\_

Lot
Block
Plan

c. Rural Address: \_\_\_\_\_

d. Area of Parcel: \_\_\_\_\_

Acres
Hectares

3. e. How is the land zoned? (e.g. Agricultural, Hamlet Residential) \_\_\_\_\_
- f. Describe the existing use(s) of the property (e.g. bare land, residential, haying/grazing): \_\_\_\_\_
- g. Estimated Cost of Development: \$ \_\_\_\_\_
- h. Estimated Start Date: \_\_\_\_\_, 20\_\_\_\_ Estimated Completion Date: \_\_\_\_\_, 20\_\_\_\_

**4. Proposed Development Details**

**a. Residential Development**

Residence/Dwelling:	Area (ft <sup>2</sup> /m <sup>2</sup> )	Height to Peak (ft/m)	New (N) or Existing (E)
<input type="checkbox"/> Manufactured Home			
<input type="checkbox"/> Single-Detached Dwelling on Permanent Foundation			
<input type="checkbox"/> <input type="checkbox"/> Developed Basement <input type="checkbox"/> Undeveloped Basement			
<input type="checkbox"/> Other Dwelling (eg. Semi-Detached, Townhouse, Tiny Home, Cabin)			
How many homes will be on the property, including the one being applied for? _____			
Attachment to Dwelling:	Area (ft <sup>2</sup> /m <sup>2</sup> )	Height to Peak (ft/m)	New (N) or Existing (E)
<input type="checkbox"/> Addition(s) – this includes any enclosed/roofed structure			
<input type="checkbox"/> Covered Deck(s) – uncovered decks do not require development permits			
<input type="checkbox"/> Garage			
Accessory Structure:	Area (ft <sup>2</sup> /m <sup>2</sup> )	Height to Peak (ft/m)	New (N) or Existing (E)
<input type="checkbox"/> Detached Garage			
<input type="checkbox"/> Shop(s) or Shed(s)			
<input type="checkbox"/> Other: _____			

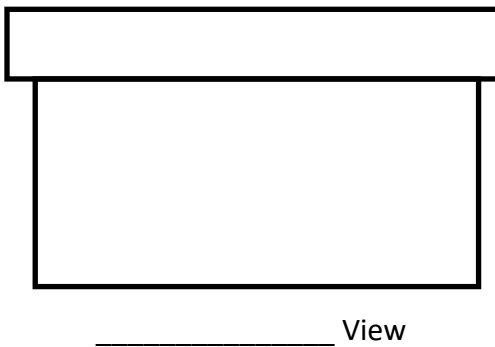
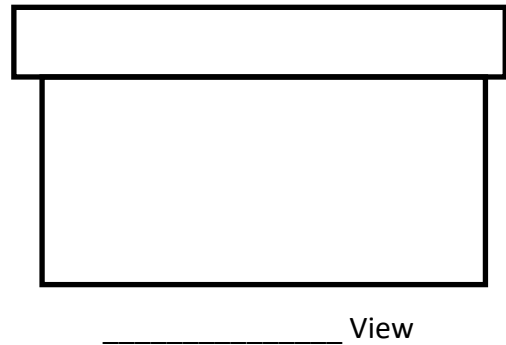
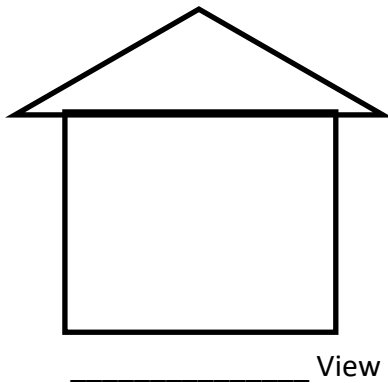
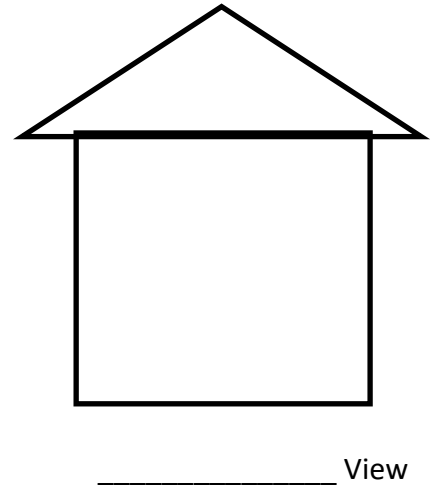
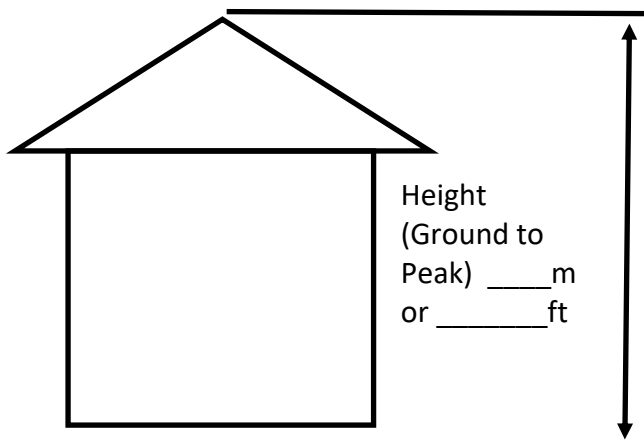
**b. Business, Commercial and Industrial Development**

Business Operation:			
<input type="checkbox"/> Home Occupation Minor, Medium or Major (Complete Sec 9)	<input type="checkbox"/> Industrial (Complete Sec 8)		
	<input type="checkbox"/> Recreational (Complete Sec 8)		
<input type="checkbox"/> Commercial (Complete Sec 8)	<input type="checkbox"/> Natural Resource Extraction & Processing (Complete Sec 10)		
Will signs be installed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete Sec 11.			
Structures to be Developed:	Area (ft <sup>2</sup> /m <sup>2</sup> )	Height to Peak (ft/m)	New (N) or Existing (E)
<input type="checkbox"/> Principal Building – this includes commercial and industrial buildings, shops, etc.			
<input type="checkbox"/> Addition(s) – this includes any enclosed/roofed structure			
<input type="checkbox"/> Accessory Shop(s) or Shed(s)			
<input type="checkbox"/> Other: _____			

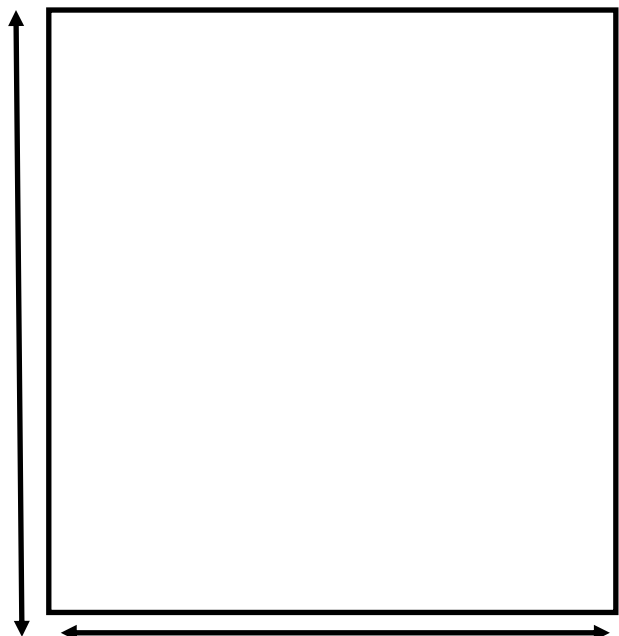
**c. Site Plans and Building Plans**

Applications **must** be accompanied by:

- Site Plan (attach or use Schedule A – Sec 15) **AND**
- Building/Floor Plans (attach  Third Party Detailed Plan,  Pre-Ordered Package Drawing **OR**  Personal Design using the drawings below or adding your own):



Floor Plan (include dimensions in m or ft); if there are no walls, please indicate "open concept".



**5. Variance Required** – please discuss this section with planning staff when submitting your application

- a. Is a variance required?     Yes     No
- b. If yes, please detail the required variance(s) on the table below.

Building/Structure	Variance Required (i.e. height, front yard setback, etc)

- c. Please describe the reasons causing the variance to be required: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**6. Demolition or Removal of Building(s) and/or Structure(s)**

- a. A site plan is required.
- b. In the table below please detail the existing structures on the land, and identify those scheduled for demolition or removal

Existing building/structure(s) (e.g. house, garage, shed)	Square footage or square meters:	Demolition/ Removal
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

- c. Who will be undertaking the demolition or removal? (e.g. contractor, yourself): \_\_\_\_\_
- d. Demolition/removal plan details:
  - i. Equipment and transportation requirements: \_\_\_\_\_  
 \_\_\_\_\_
  - ii. Stockpiling or storage of demolition/removal materials: \_\_\_\_\_  
 \_\_\_\_\_
  - iii. Demolition/removal materials disposal: \_\_\_\_\_  
 \_\_\_\_\_
- e. Please identify actions that will be taken to mitigate negative impacts of the demolition/removal (e.g. dust, noise, unsightly conditions):  
 \_\_\_\_\_  
 \_\_\_\_\_
- f. Please outline the site restoration plan (e.g. backfilling, landscaping): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- g. Estimated commencement date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_



8. j. Excluding vehicles, what equipment, trailers or materials are required for the business?

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k. Will hazardous materials be used or stored on site?  Yes  No

If yes, please describe types and amounts (examples include fuel tanks, bulk oil, chemicals, explosives, etc). Include the types of containers or tanks used and show location on site plan:

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l. Are you constructing a building or an addition to accommodate the business?  Yes  No  Existing

If yes, please ensure that you complete section 5 of this application (proposed development details).

m. Will there be an exterior sign to indicate the business?  Yes  No

If yes, please ensure that you complete section 11 of this application (signs).

**9. Home Occupations**

a. Are there any employees of the business who are not members of the family or bona fide occupants of the dwelling?  Yes Full time: \_\_\_\_\_ Part time: \_\_\_\_\_  No

If yes, where do they work? \_\_\_\_\_

If they are working from the residence, where do they park their vehicles? \_\_\_\_\_

b. Will there be any clients coming to the home?  Yes  No

If yes, how many and what time(s) of the day will they be coming to the home? \_\_\_\_\_

Where will they park? \_\_\_\_\_

c. Please list how many vehicles described above fall within each vehicle weight class

1 ton \_\_\_\_\_ 2 ton \_\_\_\_\_ Over 2 ton \_\_\_\_\_

d. Are there any other home occupations operating from this location?  Yes  No

e. Will there be any exterior indication of this home occupation (noise, exterior activity, smoke, odours, traffic, etc)?  Yes  No

If yes, please provide details. **Note:** Failure to disclose anticipated impacts shall be ground for immediate revocation of the permit. \_\_\_\_\_

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**10. Natural Resource Extraction & Processing (NREP) – Sand and/or Gravel Pit**

a. Type of Pit  Wet Pit  Dry Pit

b. Product to be extracted, please check all that apply:

Sand  Gravel  Other, please specify: \_\_\_\_\_

c. Processing operations to be conducted on site, please check all that apply:  No Processing on Site

Stripping  Crushing  Washing  Stockpiling

Other, please specify: \_\_\_\_\_

d. Please identify which product you will be processing:

Sand  Gravel  Other, please specify: \_\_\_\_\_

e. Please provide the proposed hours of operation for both extraction and processing individually:

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10. f. Do you have a Provincial authorization for your project? Check all that apply; provide digital and hardcopies.  
 Surface Materials Exploration (SME)     Surface Materials Lease (SML)     Public Pit Licence (PPL)  
 Surface Materials Licence (SMC)     Other, please specify: \_\_\_\_\_  
Application Date: \_\_\_\_\_ Disposition #: \_\_\_\_\_  
Application Status:     Pending     Approved     Refused
- g. Do you have a Conservation and Reclamation Business Plan (CRBP)?     Yes     No  
If yes, please provide both digital and hardcopies.
- h. Do you require a *Water Act* Approval?     Yes     No    If Yes, please provide both digital and hardcopy.
- i. Haul route information **is required. Please provide a map(s) showing the proposed haul route(s).**  
Do you have a current Road Use Agreement with Brazeau County?     Yes     No  
Do you have a preferred haul route?     Yes     No  
Please identify which County roads are included in your preferred haul route:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- i. Do you have an alternate haul route?     Yes     No  
Please identify which County Roads are included in your alternate haul route:  
\_\_\_\_\_  
\_\_\_\_\_

## 11. Sign Installation

- a. Please ensure that you complete the site plan in section 15, of this application. For freestanding signs, please ensure that you include the distance from aerial power lines (see application checklist).
- b. What type of sign?     Freestanding     Attached to Building     Digital
- c. Dimensions of sign: \_\_\_\_\_
- d. Height of sign: \_\_\_\_\_
- e. Will the sign be illuminated?     Yes     No    If yes, what is the method of illumination: \_\_\_\_\_
- f. Are there any other signs on site?     Yes     No  
If yes, how many and what type (freestanding, attached)
- g. Is the sign for a business?     Yes     No  
If yes, does the business have a permit?     Yes     No     Applying for One
- h. Please provide a drawing of your sign and include the following features:  
 The overall sign design with dimensions and total area  
 Height (above grade) to the top and bottom of the sign at the face of the building or sign  
 Text and graphics  
 Colours and materials of sign structure  
 Details of illumination if not lit internally
- i. If near a highway, do you have approval from Alberta Transportation?

**12. Right of Entry Authorization**

a. I/We, \_\_\_\_\_ give my/our consent for Right of Entry to my/our lands which  
print name  
are subject of this application for the purpose of a site inspection.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

b. Do you require notice of the date and time of the site inspection indicated above?  Yes  No  
If 'Yes' how and when would you like to be notified of the inspection?

\_\_\_\_\_  
\_\_\_\_\_

**13. Landowner(s) Signatures (NOTE: all owners registered on title must sign)**

I/We, \_\_\_\_\_ hereby certify that I/we am/are the registered owner(s)  
print name  
of the lands and that the information given on this form and site plan is full and complete and is, to the best of my/our knowledge, a true statement of the facts relating to this application for development.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**14. Applicant(s) Signatures (if other than the registered landowner)**

I/We, \_\_\_\_\_ hereby certify that I/we am/are the agent authorized  
print name  
to act on behalf of the registered owner(s) and that the information given on this form and site plan is full and complete and is, to the best of my/our knowledge, a true statement of the facts relating to this application for development.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\*\*\*\*The information on this form is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of this application. If you have questions about this collection or require further information please contact Brazeau County, Box 77, Drayton Valley, Alberta, T7A 1R1, telephone 780.542.7777 or email [planning@brazeau.ab.ca](mailto:planning@brazeau.ab.ca) \*\*\*\*



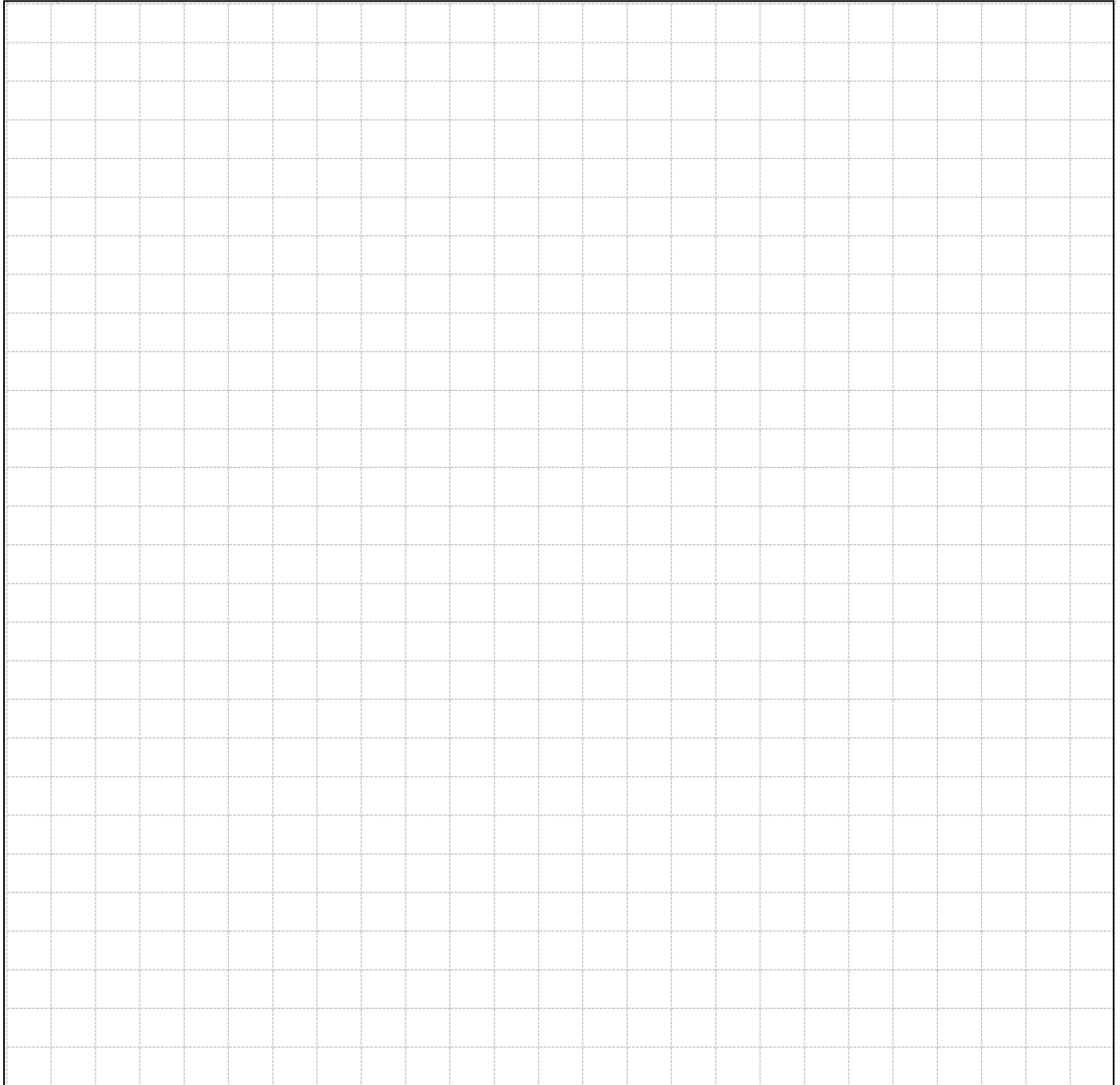
15. **Site Plan.** The Site Plan may be provided on this page or attached as a separate page. Please review the Development Permit Checklist and the sample site plan to ensure that all required information is shown. **Brazeau County Public Map is a useful mapping tool to assist with your site plan. Visit [www.brazeau.ab.ca](http://www.brazeau.ab.ca) and choose "Planning & Development map" in the Featured > Interactive maps section.**

## SCHEDULE A

This section is for office use only:

Date Approved:

Approved By:



Lot\_\_\_ Block\_\_\_ Plan\_\_\_\_\_ Quarter:\_\_\_ Section:\_\_\_ Township:\_\_\_ Range:\_\_\_-W5M  
Scale: \_\_\_\_\_ OR  Not to Scale