## Schedule "A" - Application for Subdivision Approval

FOR OFFICE USE ONLY File No:		SCHEDULE "A"
SUBDIVIDER RELATED INFORMATION		
NAME OF LAND OWNER(S)		
ADDRESS OF LAND OWNER (S)		
POSTAL CODE:PHONE NO		
SUBDIVISION NAME (IF DIFFERENT F		
DOCUMENTS TO BE RETURNED TO_		
CORRESPONDENCE TO BE DIRECTE	D TO	
LAND TO BE SUBDIVIDED		
LOCATION MUNICIPALITY		
PARCEL IDENTIFIER		
TYPE OF APPLICATION Preliminal	y (optional)ConceptTentative (	optional)FinalInstrument
FEES ATTACHEDYes	No	
TYPE OF DEVELOPMENT PROPOSEDSingle Unit DwellingOther (specify)		
APPROVAL REQUESTED FOR LOT (S) #		
ASSESSMENT REQUESTED FROM DEPT OF ENVIRONMENT AND LABOURYesNo		
IS THERE A REMAINDER LOT? Yes No		
CERTIFICATION - ON-SITE SEWER	SYSTEM NO REQUIRED (unser	viced areas)
I certify that	(is,are) being subdivided for a purpose()	
(lot(s) being aprpoved and/or remainder lot) (specify purpose)		
which will not require the installlation of a on-site sewage disposal system.		
SIGNATURE:		
WATER SERVICES	SEWER SERVICES	ACCESS
Existing Proposed	Existing Proposed	Existing Proposed
CENTRAL SYSTEM	CENTRAL SYSTEM	MUNICIPAL PUBLIC
DRILLED WELL	ON-SITE	STREET PROVINCIAL PUBLIC
DUG WELL		STREET PRIVATE ROAD
OTHER (SPECIFY)		OTHER (SPECIFY)
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I certify that I am the owner or am acting	g with the owner's written consent. (	Pertains only to final and instrumen
applications) SIGNATURE OF SURDIVIDER	DATE	