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# AMENDMENT APPLICATION

Application # \_\_\_\_\_

Required Fees (82) \$ \_\_\_\_\_

## APPLICANT INFORMATION

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ (STREET) (MUNICIPALITY) (PROV)  
Email: \_\_\_\_\_  
Contact Person/Agent: \_\_\_\_\_ Contact Phone (Cell): \_\_\_\_\_

Registered Landowner (if applicable): (if same as Applicant, check here:

Registered Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ (STREET) (MUNICIPALITY) (PROV)  
Email: \_\_\_\_\_  
Contact Person/Agent: \_\_\_\_\_ Contact Phone (Cell): \_\_\_\_\_

## AMENDMENT INFORMATION

Document(s) to be amended: (please check all that apply)

Municipal Development Plan  Area Structure Plan (specify: \_\_\_\_\_ )  
 Land Use Bylaw  Other (specify: \_\_\_\_\_ )

Statement of reasons for request to make an amendment to a Statutory Plan or Land Use Bylaw: (please use additional pages if necessary)

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Please fill out Part A and/or B below as it applies to this application.

A) Redistricting: Existing Land Use District(s): \_\_\_\_\_ Proposed Land Use District(s): \_\_\_\_\_

Address/Location: \_\_\_\_\_

Legal Address: Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_; or, Qtr \_\_\_\_\_ Sec \_\_\_\_\_ Twp \_\_\_\_\_ Range \_\_\_\_\_ West of \_\_\_\_\_ M

Recent Certificate of Title for property attached

Appropriate diagram of site showing location of proposed district(s) attached

B) Text Amendment: (briefly describe, quoting applicable provisions of document(s)) \_\_\_\_\_

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NOTE: The municipality may request such additional information determined necessary to properly evaluate the application.

Other supporting information attached: \_\_\_\_\_

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## NOTES AND DECLARATION

Personal information is collected for the purpose of processing your application form and will be used to contact you regarding your application. Collection is authorized under section 4(c) of the Protection of Privacy Act. Your personal information will be used to process your application(s). Please be advised that your name, address and details related to your application may be inputted into an automated system to generate content to make decisions, recommendations, and predictions and may be included on reports that are available to the public as required or allowed by legislation. Your information will only be used solely for the purposes related to the Town of Morinville.

**By submitting an application for amendment I, the Applicant, am allowing right of entry for inspection purposes, and hereby make application and acknowledge all plans and information submitted are, to the best of my knowledge, true and accurate. It is understood that approval does not relieve the Applicant from full responsibility for ascertaining, complying, and carrying out any development in accordance with applicable Federal and Provincial Statutes and Regulations, and the conditions of any covenant, caveat, easement or other instrument affecting the building or the land.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Landowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## INTAKE INFORMATION (for office use only)

Complete Application:

Application Form – complete & landowner signed.  
 Recent Title Search / Diagram of Proposal, if applicable.  
 Other Required Information, if applicable.  
 Receipt for Payment of Fees.

Accepted by: \_\_\_\_\_

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

Signature \_\_\_\_\_

Date Received  
Stamp