



BYLAW APPLICATION

Create

Amend

1. APPLICANT INFORMATION (Authorized person acting on behalf of registered owner)

_____	_____	_____
Applicant Name (please print)	Applicant Company (if applicable)	Applicant Position (if applicable)
	(w/h)	
	(c)	
_____	_____	_____
Mailing Address (include postal code)	Phone # (include area code)	Fax # (include area code)

Should correspondence for all your current City of Cold Lake accounts be sent to this mailing address?

Yes No (If no, please complete form 12-00-09, Address Change)

2. DOCUMENT PROPOSED FOR AMENDMENT

✓	Document	Name	Bylaw Number
	Municipal Development Plan	Municipal Development Plan	
	Inter-municipal Development Plan	Inter-municipal Development Plan	
	Area Structure Plan		
	Area Redevelopment Plan		
	Land Use Bylaw		
	Other		

3. AMENDMENT PROPOSED & REASON

From:	To:

_____ Application Date

_____ Applicant Signature

Bylaw Amendment Application Checklist

Application Form – Completed in Full

Receipt of Fees (See Fee Schedule for Applicable Fees)

5513 - 48 Avenue, Cold Lake, AB • T9M 1A1 • Ph: 780-594-4494 • Fax: 780-594-3480