THE CORPORATION OF THE DISTRICT OF CENTRAL SAANICH
1903 Mt. Newton Cross Road Saanichton B.C. V8M 2A9
Phone (250) 544-4209 Fax (250) 652-4737 www.csaanich.ca

Application to **Subdivide**

Application is made to subdivide the property indicated below.

(This application may be submitted after the Applicant had met the conditions of the Preliminary Layout Consideration.)

Project Info

Address				Zoning
Lot	Section	Range	Plan	PID
Subdivision Proposal				

Owner

Name		
#/Street	City	Postal Code
Telephone	Fax	email

Applicant (if not owner)

Name		Business Licence
#/Street	City	Postal Code
Telephone	Fax	email

I, the owner of the above property, hereby authorize and appoint _____ as my agent for the purposes of the subdivision application.

This application is made with my full knowledge and consent.

Owner (required) _____ Date _____ Applicant _____ Date _____

Any personal information provided in this application is collected for the purpose of administering the Local Government Act and the bylaws of the municipality under part 26 of the Local Government Act, and under the authority of those enactments. Questions about the collection of the information may be directed to the Freedom of Information Coordinator at 652-4444.

Fees

Subdivision Application Fees

Five lots or less	**$750**
or	
More than five lots	**$900**

Administration Fee
4% of estimated cost of works & services required by subdivision

Office Use	
	File No.
Approving Officer	Date
TOTAL FEES	$
Fees Received By	Date

Revised March 2007