



# SEASONAL ACCESS TO COUNTY LAND CONSENT APPLICATION

## DOCKS & MOORINGS

MUNICIPAL LAND MANAGEMENT  
53109A Hwy 779  
Parkland County AB T7Z 1R1  
Phone: 780-968-8888  
Fax: 780-968-8413  
Toll Free: 1-888-880-0858

### INSTRUCTIONS

Submit completed forms in person, or by mail, to **Parkland County C/O Municipal Land Management, 53109A Hwy 779, Parkland County, AB T7Z 1R1**, or via email to: [landmanagement@parklandcounty.com](mailto:landmanagement@parklandcounty.com)

REQUESTOR INFORMATION	
<b>NAME:</b> C/O (if applicable)	
<b>MAILING ADDRESS:</b>	
<b>TELEPHONE #:</b>	<b>EMAIL:</b>

RESIDENT LAND DESCRIPTION							
QRT/LSD	SEC	TWP	RGE	W ___ M	REGISTERED PLAN	BLK	LOT

ARE YOU A RESIDENT OF PARKLAND COUNTY?  YES  NO      SUBDIVISION: \_\_\_\_\_

### IS THIS AUTHORIZATION BEING OBTAINED TO FORM AN APPLICATION FOR A TEMPORARY FIELD AUTHORIZATION – TFA :

- YES, this authorization will be used for a TFA application
- NO, this authorization is for a purpose other than a TFA application

If your answer is NO, please describe the purpose for the authorization:

### SPECIFICATIONS:

- Consent is for the applicant’s access to their seasonal dock, boat lifts and swim platforms, however, does **NOT** give unrestricted access to the lands for the applicant, nor does it restrict access to others. Reserve lands are for public use and enjoyment.
- Docks, boat lifts and swim platforms are permitted to be stored out of season **ONLY** within the authorized term of this consent and the structures must be flagged or marked to clearly identify their location during the winter months
- Clearing of trees or brush on the County Reserve lands are **NOT** permitted without separate written consent from the County.
- No structures are to be constructed upon the County Reserve Lands.
- Consent is valid for three (3) years and are non- transferable.
- Applicant **MUST** submit TFA approval within 90 days of consent granted from Parkland County. If TFA is not approved **AND/OR** submitted, Parkland County’s consent will be null and void.

\_\_\_\_\_  
Signature Submission Date

<b>OFFICE USE ONLY</b>			
Roll # _____	File # : _____	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
Application Fee : _____+ GST	Finance Code F1710		
Term of Authorization: _____ / _____ / _____ to _____ / _____ / _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>Month</span> <span>Day</span> <span>Year</span> <span>Month</span> <span>Day</span> <span>Year</span> </div>			
ADDITIONAL INFORMATION: _____ _____			
_____ COUNTY REPRESENTATIVE		_____ DATE	

The personal information you provide will be used for the purpose of processing and reviewing this application and is collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. If you have any questions about the collection, use and disclosure of this information, please contact the FOIP Coordinator at Parkland County, 53109A Hwy 779 Parkland County T7Z 1R1 (780-968-3229) or email [foip@parklandcounty.com](mailto:foip@parklandcounty.com)