

Applicant/Landowner Information	
Applicant Name: _____ Mailing Address: _____ City, Prov: _____ Postal Code: _____ Ph: _____ Cell: _____ Email: _____	Registered Owner Name(s) (if different from applicant): _____ Mailing Address: _____ City, Prov: _____ Postal Code: _____ Ph: _____ Cell: _____ Email: _____

Parcel Information / Legal Description					
Plan	Block	Lot	Subdivision		
Meridian <input type="checkbox"/> W4 <input type="checkbox"/> W5 (select one)	Range	Township	Section	Quarter Section <input type="checkbox"/> PT <input type="checkbox"/> NW <input type="checkbox"/> NE <input type="checkbox"/> SW <input type="checkbox"/> SE (select one)	Municipal Address (if applicable)}
Additional Information for Area					

Information Requested	
Roads:	<input type="checkbox"/> Profiles <input type="checkbox"/> Signage <input type="checkbox"/> Water <input type="checkbox"/> Sanitary <input type="checkbox"/> Storm <input type="checkbox"/> Pavement <input type="checkbox"/> Gravel <input type="checkbox"/> Landscape <input type="checkbox"/> Other: _____
File Format:	<input type="checkbox"/> PDF <input type="checkbox"/> AutoCAD

Authorization	
I hereby make request for information as (or on behalf of) the registered owner of the above property.	
_____ <small>Date of Application</small>	_____ <small>Signature of Applicant</small>
<p>The personal information provided by you is being collected under the authority of the <i>Municipal Government Act</i> and will be used for the purposes under that Act. The personal information that you provide may be made public, subject to the provisions of the <i>Freedom of Information and Protection of Privacy Act</i>. Questions regarding the collection and use of this information may be directed to the Freedom of Information & Protection of Privacy (FOIP) Coordinator, Parkland County, 53109A HWY 779, Parkland County, Alberta T7Z 1R1 (780-968-3229).</p>	

FOR PARKLAND COUNTY USE ONLY	
APPLICATION NO.: _____ - _____	
_____ <small>Date Requested (yyyy-mm-dd)</small>	_____ <small>Parkland County Representative</small>
_____ <small>Date Completed (yyyy-mm-dd)</small>	_____ <small>Parkland County Representative</small>

PLANNING AND DEVELOPMENT SERVICES DISCLAIMER - This information is not to be taken as accurate nor current - it is only an indication of the approximate position of infrastructure. Utility locates and field verification must be completed prior to design and construction.

Notes:

1. A non-refundable application fee may be required with this application as per Schedule D of the Fees and Charges approved by Council.
2. All Shallow Utilities information to be obtained from the original provider.
3. Please allow 15 business days for this requested information.

The Sketch Plan should indicate the following:

- Location of Area, dimensioned from the closest property corner
- Boundaries of the land parcel including dimensions
- All drainage courses
- All roads adjacent to the parcel labeled
- North arrow for orientation

Please indicate proposed location by placing flagged stakes at both sides of the intended approach if on site meeting with Parkland County representative is not possible.

