

SCHEDULE A2(i)  
THE CORPORATION OF THE CITY OF DUNCAN

Application/File No. \_\_\_\_\_

APPLICATION FOR ZONING AMENDMENT

I/We hereby apply for

\_\_\_\_\_ an amendment to the text of Zoning Bylaw No. \_\_\_\_\_

\_\_\_\_\_ the rezoning of the property described as (legal description): \_\_\_\_\_

\_\_\_\_\_ and located at (street address or general location) \_\_\_\_\_

from \_\_\_\_\_ to \_\_\_\_\_ zone.

Required application fee of \$\_\_\_\_\_ and the completed Rezoning Information Forms are attached.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

THIS APPLICATION IS MADE WITH MY FULL KNOWLEDGE AND CONSENT.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Registered Owner's Signature

Where the Applicant is NOT THE REGISTERED OWNER, the Application must be signed by the REGISTERED OWNER or his SOLICITOR.

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Application fee \$\_\_\_\_\_ received.

Receipt No. \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Official

SCHEDULE A2 (ii)

CORPORATION OF THE CITY OF DUNCAN  
ZONING AMENDMENT INFORMATION FORM

THE INFORMATION REQUESTED IN THIS FORM IS REQUIRED TO EXPEDITE THE APPLICATION AND ASSIST THE STAFF IN PREPARING A RECOMMENDATION.

This form is to be completed in full and submitted with all requested information, Official Community Plan and Zoning Amendment Application, Application Fee and Certificate of State of Title or of Indefeasible Title for the subject property.

Applicant and Registered Owner

1. (1) Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone: Business \_\_\_\_\_ Home \_\_\_\_\_

(2) Registered Owner's Name \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone: Business \_\_\_\_\_ Home \_\_\_\_\_

(3) A copy of a State of Title of Certification, or a copy of a Certificate of Indefeasible Title, dated no more than 30 days prior to submission of the application must accompany the application as a proof of ownership.

Application Fee

2. An Application Fee as set out in Fees and Charges Bylaw No. 1759 shall be made payable to the City of Duncan and shall accompany the Application

Text Amendment

3. Describe the Proposed Text Amendment \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Rezoning – Property to be Rezoned

4. (1) Legal Description in Full \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SCHEDULE A2 (iii)

(2) Location (street address of property, general description or map \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(3) Size of Property (area, number of parcels) \_\_\_\_\_  
\_\_\_\_\_

(4) Present Zoning \_\_\_\_\_

(5) Proposed Zoning \_\_\_\_\_

Description of the Existing Use/Development \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(6) Description of the Proposed Use/Development (use Separate sheet if necessary)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(7) Approximate Commencement Date of the Proposed Project \_\_\_\_\_  
\_\_\_\_\_

Reasons in Support of Application

5. Reasons and comments in support of the application (use separate sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SCHEDULE A2 (iv)

Attachments

6. At the time of providing Application and Information Forms to the applicant the CAO or Director of Corporate Services shall indicate which of the following attachments are required or not required for this Application. The CAO or Director of Corporate Services may require additional information.

(1) A dimensioned Sketch Plan drawn to scale of \_\_\_\_\_ to \_\_\_\_\_ showing, the parcel(s) of part of the Parcel(s) to be redesignated, rezoned and the location of the existing buildings, structures and uses.

REQUIRED: Yes \_\_\_\_\_ No \_\_\_\_\_

(2) A dimensioned Site Development Plan drawn to a scale of \_\_\_\_\_ to \_\_\_\_\_ showing the proposed use, buildings and structures, highway access, etc.

REQUIRED: Yes \_\_\_\_\_ No \_\_\_\_\_

(3) A Contour Map (Plan) drawn to the scale of \_\_\_\_\_ to \_\_\_\_\_ with contour interval of \_\_\_\_\_, if warranted by the topographic condition (of the subject site).

REQUIRED: Yes \_\_\_\_\_ No \_\_\_\_\_

(4) A dimensioned Sketch Plan drawn to scale of \_\_\_\_\_ to \_\_\_\_\_ of the proposed subdivision, where subdivision (small or large) is contemplated.

REQUIRED: Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

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FOR OFFICE USE ONLY

Forms duly completed, received.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Officer