

**TOWN OF STRATFORD**

234 Shakespeare Drive  
Stratford, PE C1B 2V8



**Planning Department**

Phone: (902)569-6255  
Fax: (902) 569-1845

**APPLICATION FOR:**

**FEES**

Bed and Breakfast Agreement	\$300.00
Inlaw Suite Agreement	\$300.00
Cottage Agreement	\$300.00
Development Agreement	\$300.00
Variance (including more than one variance for the same application)	
É Minor (10% or less )	\$200.00
É Major (greater than 10%)	\$300.00
Official Plan Amendment	\$300.00
Zoning Amendment (including more than one amendment for the same application)	\$300.00
Comprehensive Development Plan Approval (CDA)	\$300.00
Change of Use	Actual Cost Min. \$ 50.00

**Application will not be accepted without full payment of fees:  
Payments may be made by cash, Visa, Mastercard or cheque payable to the Town of Stratford**

**PLEASE PRINT OR TYPE**

1. PID Number, Lot Number, and Civic Address subject property:

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

2. Name and mailing address of landowner:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Telephone: \_\_\_\_\_

3. Name and mailing address of applicant:           check here if same

(If the applicant and landowner are different, a letter of permission is required from the landowner) is support of this application.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Telephone: \_\_\_\_\_

4. If applying for a variance, please complete the following:

	ByLaw Requirement	Variance Request	Variance Percentage
Front Yard			
Side Yard			
Rear Yard			
Lot Coverage			
Height			

**Signature of Landowner** \_\_\_\_\_

**Date** \_\_\_\_\_

**Signature of Applicant or Agent** \_\_\_\_\_

**Date** \_\_\_\_\_