

TOWN OF STRATFORD

APPLICATION FOR DEVELOPMENT

Property Information

Project Site Civic Address: _____
 Property Tax No. (PID): _____ Current Zoning: _____ Lot No.: _____
 Property Size: _____ ft.², _____ Acres.
 Are there any existing structures on the property? No Yes, please describe:

Contact Information

Applicant Name: _____
 Address: _____ Postal Code: _____
 Res. Tel.: _____ Bus. Tel.: _____ Mobile: _____
 Fax: _____ Email: _____
 Property Owner Name (Same as above): _____
 Address: _____ Postal Code: _____
 Res. Tel.: _____ Bus. Tel.: _____ Mobile: _____
 Contractor: _____ Bus. Tel.: _____ Mobile: _____
 Arch./Eng.: _____ Bus. Tel.: _____ Mobile: _____

Project Type

New Addition Demolition Relocation Renovation Change of Use

Type of Permit

Single Family Commercial Accessory Building Accessory Structure (Pool, Deck, etc.)
 Semi-Detached Industrial Institutional Row/Townhouse
 Apartment Fence Signage Excavation/Stockpiling

	Length (ft)	Width (ft)	Height (ft)	No. of Units	No. of Parking
Project Details					
	Main	Second	Garage	Foundation	Bonus Room
Floor Area (ft ²)					
Heating Type:		Roof Material:		Cladding Type:	

Project Start Date: _____ Estimated Date of Completion: _____
 Estimated Value of Project (not including land cost): \$ _____

Infrastructure Components

Sanitary sewer services: Municipal On-site Engineer Designed: Yes No
 Name of on-site designer, if applicable: _____ Bus. Tel.: _____
 Name of on-site installer, if applicable: _____ Bus. Tel.: _____
 Water services: Municipal On-site well Private
 Storm sewer services: Piped Curbed Open ditch Undetermined
 Entranceway permit required: Yes No, explain: _____

Declaration

I hereby covenant and agree that:

- ❖ I would waive all rights or action against the Town of Stratford and/or any of its staff in respect of any damages which may be caused through the operation of any provision(s) in any of the said bylaws or for the revoking of a permit for any cause or irregularity or nonconformity with the bylaws or regulations adopted by the Town of Stratford.
- ❖ I would be responsible for designing and building the proposed property conforming with the National Building Codes and all other relevant provincial rules and regulations.
- ❖ I would be responsible or damage to sidewalks, curbs, gutters, etc. and I will bear the cost of repair or replacement of the same to the complete satisfaction of the Town of Stratford.
- ❖ I certify that all information contained herein, the attached plans, and other attached documents are complete and correct.
- ❖ As per section 7.9.1 of The Zoning and Development Bylaw #45, an application for a Development Permit shall constitute authorization for inspection of the building or land in question by an officer or agent of the Town for the purpose of ensuring compliance with the provisions of this Bylaw.

Property Owner or Authorized Agent (Please Print)

Signature

Date

For Office Use Only

Submission Date: _____ <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%;">Yes</th> <th style="width: 15%;">No</th> <th style="width: 15%;">Incomplete</th> </tr> </thead> <tbody> <tr> <td>Bldg Plans</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Site Plan</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Drainage Plan</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Utility</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Entrance</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Zoning</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Deposit Paid</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Receipt: _____</td> </tr> </tbody> </table> Development Bylaw: <input type="checkbox"/> Approved Comments: _____ _____ Development Officer: _____ Approval Date: _____		Yes	No	Incomplete	Bldg Plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drainage Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Zoning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Deposit Paid	<input type="checkbox"/>	<input type="checkbox"/>	Receipt: _____	Building Bylaw Review Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Building Bylaw: <input type="checkbox"/> Approved Comments: _____ Building Inspector: _____ Approval Date: _____ Development Permit Number: _____ Date Permit Issued: _____ Development Permit Fee: _____ Fee Payment Date: _____ Civic Address: _____ <input type="checkbox"/> Data Entered <input type="checkbox"/> Data Approved
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