



Town of Sylvan Lake
Municipal Government Building
5012 – 48 Avenue
Sylvan Lake, AB T4S 1G6

tsl@sylvanlake.ca
T 403.887.2141
F 403.887.3660
sylvanlake.ca

SUBDIVISION APPLICATION

FILE NUMBER: _____

DATE: _____

FEES: _____

RECEIPT: _____

TO BE FILLED OUT BY THE APPLICANT

OWNER

Name (print) _____

Mailing address _____

Phone _____ Email address _____

AGENT (if applicable name & company) _____

Mailing address _____

Phone _____ Email address _____

LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED

Quarter Section _____

Being all/part of Lot _____ Block _____ Plan _____ C.O.T. No. _____

Municipal Address (if applicable) _____

Title Area _____ ha (ac) Number of parcels being created _____

Size of parcels being created _____

LOCATION OF THE LAND TO BE SUBDIVIDED

Is the land immediately adjacent to the municipal boundary? Yes ☐ No ☐

If "yes", the adjacent municipality is _____

Is the land within 1.6 kilometers of a center line of a highway RoW? Yes ☐ No ☐

If "yes", the Highway/Secondary Road is Number _____

Does the parcel contain or is it adjacent to a permanent watercourse (lake, stream, etc.), a canal or drainage ditch? Yes ☐ No ☐ If "yes", state name _____

EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED

Existing use of the land _____

Proposed use of the land _____

Current zoning of the land _____



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PHYSICAL CHARACTERISTICS OF THE LAND TO BE SUBDIVIDED

Describe the topography (flat, rolling, steep, etc.) _____

Describe the vegetation and water on the land (ie. brush, shrubs, trees, sloughs, creeks, etc.) _____

Describe the soil type (sandy, loam, clay, etc.) _____

EXISTING BUILDINGS ON THE LAND TO BE SUBDIVIDED

Describe any permanent buildings or structures and whether they are to remain _____

WATER AND SEWER SERVICES

Will the proposed subdivision connect to the Town's municipal water and wastewater systems? Yes ☐ No ☐

If "no" please describe the manner in which water supply and sewer disposal will be addressed _____

PROPOSED DISPOSITION OF RESERVES

- ☐ Land dedication (location and areas to be shown on sketch) _____
- ☐ Money in place of reserves (see note) _____
- ☐ Deferment (by Caveat) _____
- ☐ Not applicable (eg. Existing title less than two (2) acres, first parcel out of quarter section, reserves previously provided).

NOTE: In the event that the Subdivision Authority decides that money is to be provided in place of reserves, the registered owner may be required to provide an appraisal of the land referred to in the subdivision application.

INDICATE IF THE LAND THAT IS THE SUBJECT OF THE SUBDIVISION APPLICATION IS SITUATED WITHIN:

- | | Yes | No |
|---|--------------------------|--------------------------|
| a. 450m of an operating or non-operating landfill or hazardous waste management facility | <input type="checkbox"/> | <input type="checkbox"/> |
| b. 300m of an area of parcel of land that is currently being used for the processing of waste water | <input type="checkbox"/> | <input type="checkbox"/> |
| c. 300m of a livestock feeding lot | <input type="checkbox"/> | <input type="checkbox"/> |
| d. 1.5 km of a sour gas facility | <input type="checkbox"/> | <input type="checkbox"/> |



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INDICATE IF THE LAND THAT IS THE SUBJECT OF THE SUBDIVISION APPLICATION CONTAINS AN ABANDONED OIL OR GAS WELL:

- | | Yes | No |
|---|--------------------------|--------------------------|
| a. Does an abandoned oil and gas well exist within the subject area of the application? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is a map attached from the Alberta Energy Regulator website (AER Abandoned Well Map Viewer) indicating if/where any abandoned oil and gas wells are located within the subject area? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is a completed Abandoned Wells Declaration form attached? | <input type="checkbox"/> | <input type="checkbox"/> |

RIGHT-OF-ENTRY

The characteristic of the land must be taken into account when subdivision applications are reviewed. A visual inspection of the area proposed for subdivision is necessary to determine these characteristics. As the owner, or person in possession of the land proposed for subdivision, please indicate below, whether an authorized person may enter upon your land to carry out a visual inspection.

☐ I am in favor of an inspection of the property or ☐ I am opposed to an inspection of the property

REGISTERED OWNER OR PERSON ACTING ON HIS/HER BEHALF

I, _____ hereby certify that
(Full name in block capitals)

☐ I am the registered owner or ☐ I am the agent authorized to act on behalf of the registered owner

And that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts related to this application for subdivision.

AUTHORIZATION, IF APPLICABLE, TO ACT ON BEHALF OF THE REGISTERED OWNER

I (We) hereby authorize _____ to act on my (our) behalf on matters pertaining to this application for subdivision.

Signature of owner

This personal information is being collected for the Town of Sylvan Lake under the authority of Section 33c of the Freedom of Information and Protection of Privacy (FOIP) Act and will be used to collect information regarding Subdivision Application. The personal information provided will be protected in accordance with Part 2 of the Act. If you have any questions regarding the collection, use and disclosure of personal information, please contact the FOIP Coordinator at 403-887-2141. REVISED MARCH 2022