



TOWN OF FORT SMITH
 Post Office Box 147, Northwest Territories, X0E 0P0
 Phone: (867) 872-8400 Fax: (867) 872-8401

FORM J:

APPLICATION FOR AMENDMENT TO THE ZONING BYLAW

I hereby make application to amend the Zoning Bylaw.

Applicant: _____

Telephone: _____

Address: _____

Owner of Land: _____

Telephone: _____

Address: _____

Land Description: Lot: _____ Block: _____ Plan: _____

Civic Address: _____

Proposed Amendment:

From Zone: _____ To Zone: _____

Reasons in support of Application for Amendment:

I enclose \$100.00, being the application fee.

 Signature of Applicant

 Date