



TOWN OF FORT SMITH

Post Office Box 147, Northwest Territories, XOE OPO
Phone: (867) 872-8400 Fax: (867) 872-8401

Application No. _____

DEVELOPMENT PERMIT APPLICATION

Applicant Information:

Name: _____ Interest (if not owner): _____
Telephone: _____ Email: _____
Mailing Address: _____

Owner Information (if different than applicant):

Registered Owner's Name: _____
Telephone: _____ Email: _____
Mailing Address: _____

Property Information:

Civic Address to be Developed: _____
Zoning: _____ Lot# _____ Block# _____ Plan# _____
Lot Width: _____ metres Lot Depth: _____ metres Lot Area: _____ square metres
Existing Use(s) of Property: _____
Proposed Use(s) of Property (if applicable): _____

Estimated Cost of Project: \$ _____

Each application for a Development Permit **shall** be accompanied by a fee calculated in accordance with the current consolidated rates and fees bylaw.

I hereby make application under the provisions of the Town of Fort Smith Zoning Bylaw 936 for a Development Permit, in accordance with the plans and supporting information submitted herewith and which form a part of this application.

SIGNATURE:

Applicant's Signature

Date

Owner's Signature (if different than applicant)

Date



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PROPOSED DEVELOPMENT(S):

Check all applicable development(s) and submit the completed, corresponding checklist of required items with your application.

1. CONSTRUCTION 2. EXCAVATION 3. HOME OCCUPATION
 4. RELOCATION 5. DEMOLITION 6. SIGN

1. CONSTRUCTION:

Proposed Building Dimensions:

Width: _____ Length: _____ Height: _____ Area: _____

1 set of site plans showing:
- Building outlines; - Legal description - Provisions for landscaping and drainage
- Yards/Setbacks (front, rear, and side) - Provisions for off-street loading, parking, and property access

1 set of floor plans (minimum 1:100 scale)

1 set of elevations (minimum 1:100 scale)

1 set of sections (minimum 1:100 scale)

Estimated commencement date _____

Estimated completion date _____

Proof that documents have been submitted to and reviewed by the Office of the Fire Marshal of the NWT (single-family dwelling units are exempted)

2. PROPOSED EXCAVATION

1 set of plans for the location of the excavation

Plans for excess fill: _____

Length (metres) _____ Width (metres) _____ Depth (metres) _____

Planned Excavation Start Date _____

Planned Excavation Completion Date _____

3. HOME OCCUPATION

Business License Application Completed and Fees Paid.

Business License and Zoning Bylaws reviewed to ensure the Home Occupation is suitable for a residential zone.

A complete description of the business is submitted for review by the Development Officer.



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4. PROPOSED RELOCATION

Type of Building or Structure to be Relocated: _____

From: Lot# _____ Block# _____ Plan# _____

To: Lot# _____ Block# _____ Plan# _____

Proposed Route: _____

Planned Date of Move: _____

The following **CONDITIONS** apply to the relocation of buildings the applicant is responsible for:

1. Bylaw 936 Part 6.1 (7)
2. Securing a permit to construct on the destination property if applicable.
3. Alerting NorthwesTel Inc., NWT Power Corporation, the GNWT Department of Highways, and RCMP of the move.
4. Any damages which may occur as a result of this relocation.

5. PROPOSED DEMOLITION

Type of Building or Structure to be Demolished: _____

Demolition Methods to be used: _____

Disposal Methods: _____

Planned Demolition Start Date: _____

Planned Demolition Finish Date: _____

6. PROPOSED SIGN

Site Plan showing the location of the sign.

1 set of drawings to scale, showing:

- Sign location
- Dimensions (Height, Width, and Thickness)
- Size of letters
- Projection from the building face
- Height above average ground level at the building face
- Manner of illumination, animation, or flashing lights (if applicable)

Message on sign: _____

Planned Installation Date: _____