

FORM H



Application No. _____

TOWN OF SEXSMITH

APPLICATION FOR MUNICIPAL DEVELOPMENT PLAN/LAND USE BYLAW
AMENDMENT

Name of Applicant: _____
Address of Applicant: _____
Phone #: _____

Name of Registered Landowner (if different from applicant)

Address: _____ Phone #: _____

☐ Land Use Bylaw Amendment ☐ Municipal Development Plan Amendment

Legal Description of property affected by amendment (if applicable):

Lot _____ Block _____ Plan _____ or Quarter Section _____

If reclassifying land, details of proposed amendment:

From: _____ To: _____

If not reclassifying land, details of proposed amendment:

Reasons supporting the proposed amendment:

I/We enclose the required application fee of \$ _____

Signature of Applicant

Date

Signature of Registered Landowner (If different from above)

Date