



COUNTY of ANNAPOLIS  
NATURALLY ROOTED

752 St. George Street, PO Box 100  
Annapolis Royal, Nova Scotia, Canada B0S 1A0  
Phone: (902) 532.2331 Fax: (902) 532.2096  
Website: AnnapolisCounty.ca  
[planning@annapoliscounty.ca](mailto:planning@annapoliscounty.ca)

File #: \_\_\_\_\_

**APPLICATION FORM FOR MUNICIPAL PLANNING STRATEGY or  
LAND USE BY-LAW AMENDMENT or DEVELOPMENT AGREEMENT**

APPLICANT INFORMATION	REGISTERED OWNER(S) OF PROPERTY <i>(If different from applicant)</i>
Name:	Name 1:
Company Name:	Name 2:
Mailing Address:	Mailing Address:
Email Address:	Email Address:
Phone Number:	Phone Number:

PLEASE NOTE: Where the applicant is not the registered owner(s), a signed written authorization from the registered owner(s) must accompany this application.

PROPERTY INFORMATION	LOT DESCRIPTION
Civic Address:	<b>Water Services:</b> <input type="checkbox"/> existing <input type="checkbox"/> central system <input type="checkbox"/> proposed <input type="checkbox"/> drilled/artesian <input type="checkbox"/> dug well <input type="checkbox"/> N/A <input type="checkbox"/> municipal <input type="checkbox"/> private <b>Sewer Services:</b> <input type="checkbox"/> existing <input type="checkbox"/> central system <input type="checkbox"/> proposed <input type="checkbox"/> on-site <input type="checkbox"/> N/A <input type="checkbox"/> municipal <b>Access:</b> Is there direct access to the lot(s)? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> existing public street or highway <input type="checkbox"/> private road <input type="checkbox"/> N/A  Road/street name: _____ Is access provided by water? <input type="checkbox"/> yes <input type="checkbox"/> no Is access provided by a private right of way? <input type="checkbox"/> yes <input type="checkbox"/> no
PID#:	
Community:	
Present Use:	
Proposed Use:	

APPLICATION CHECKLIST
<input type="checkbox"/> Site Plan <input type="checkbox"/> Building plans <input type="checkbox"/> Elevations or photographs of any proposed structure <input type="checkbox"/> Plan of Subdivision <input type="checkbox"/> Other relevant documents: _____

EXPLANATION OF PROPOSAL
Please provide a short explanation of your proposal (Please include a detailed letter with full explanation if needed)

**By signing this application, I (we) do solemnly declare that all the statements and attachments are true and accurate.**

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY
<b>Type of Application</b> <input type="checkbox"/> MPS Text <input type="checkbox"/> MPS Map <input type="checkbox"/> LUB Text <input type="checkbox"/> LUB Map <input type="checkbox"/> DA <input type="checkbox"/> DA Amendment <input type="checkbox"/> DA Discharge
Date Received _____    Date Paid _____    Receipt # _____