



Sign Application

Fee: \$100
Land Use Bylaw 2017/48

P.O. Box 6960, Wetaskiwin, AB T9A 2G5
Phone: (780) 352-3321
Fax: (780) 352-3486
Email: wpermits@county10.ca

Date Received: _____

CONTACT INFORMATION (ALL landowners must be identified and sign application)

APPLICANT NAME(S):				Phone:	
Mailing Address:					
Town/City:		Postal Code:		Email:	
LANDOWNER NAME(S):				Phone:	
Mailing Address:					
Town/City:		Postal code:		Email:	

LAND INFORMATION/SIGN LOCATION

1/4		Section		Township		Range		West of <input type="checkbox"/> 4 or <input type="checkbox"/> 5 Meridian
Lot		Block		Plan		Rural Address (Blue Sign)		
Subdivision/Hamlet								

SIGN INFORMATION

Are there currently any other signs on the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Building Material of Sign	
Attach an example of what the Sign will display with Colors and dimensions shown. <input type="checkbox"/> Yes	Attach a Site Plan showing location of sign and distance to property lines. <input type="checkbox"/> Yes

PAYMENT OPTIONS <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Online Banking (Use Account Number 999951) <input type="checkbox"/> Credit Card (*There is a service charge for all credit card payments)	APPLICATION SUBMISSION: Applications can be submitted by: Email – wpermits@county10.ca Drop off at County Office – 243019A Highway 13 Mail - P.O. Box 6960, Wetaskiwin, AB T9A 2G5
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AUTHORIZATION

By signing this application, I/we:

- understand that the proposed development shall not commence unless a development permit has been issued;
- understand that the application may be refused if the development does not conform to all aspects of the Land Use Bylaw;
- hereby authorize representatives of the County of Wetaskiwin No. 10 to enter the above described lands with respect to this application only; and,
- understand the personal information on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act. The information will be used to process the application and the names and addresses may be included on reports that are available to the public. If you have any questions on the collection and use of this information, please contact the FOIP Coordinator at (780) 352-3321.

Signature of Authorized Applicant(s)

Signature of Landowner(s)

For Office Use Only	Roll #	App #	LU District	Division #
PER DIS	LUB Section(s)	Receipt #	ADO	