



**MUNICIPAL DISTRICT OF BONNYVILLE NO. 87**

Bag 1010, Bonnyville AB T9N 2J7  
Phone: 780-826-3171 Fax: 780-826-4524

Application No.

**APPROACH DEVELOPMENT PERMIT APPLICATION**

**OFFICE USE ONLY**

**APPLICANT INFORMATION:**

Applicant: \_\_\_\_\_ Contact Name : \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ **Email Address:** \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Registered owner: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**LAND INFORMATION:**

Plan: \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Roll No. \_\_\_\_\_

Part (eg NW, SW, NE, SE): \_\_\_\_\_ ¼ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ W4M

**Proposed Use:**

Residential  Agricultural  Industrial  Widening  Relocating  Short Term \_\_\_\_ days

**Purpose of Approach (include safety and topographical limitation if request is for an additional approach):**

**Please submit a site drawing including: approach locations, distance from property lines, roads, right of ways, intersections, and any natural or man made hazards.**

Estimated start date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_ Permit Fee: \_\_\_\_\_

The construction of this approach shall be undertaken in accordance with the M.D. of Bonnyville's Construction Standards as per *Attachment A*.

\_\_\_\_\_  
Date

Receipt #:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Signature of Applicant

Site Location Inspection Requested \_\_\_\_\_ Completed \_\_\_\_\_

Accepted  Rejected  Amendments Required: \_\_\_\_\_

Final Construction Inspection Requested \_\_\_\_\_ Completed \_\_\_\_\_

Accepted  Rejected  Amendments Required: \_\_\_\_\_

Final construction approved \_\_\_\_\_

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

The personal information collected under Section 33c of the FOIP act will be used to contact you in regards to your application for approach construction. If you have any questions about his collection, please contact the Municipality's FOIP coordinator.