

Office address: Mailing address: 103 Ashley Street P. O. Box 220 Bulyea SK SOG OLO Bulyea SK SOG OLO

**Development Officer** Telephone: 306-725-3258 Email: rm220devofficer@rm220.ca

## **DISCRETIONARY USE APPLICATION**

## FORM DU1

1)	Applicant (Must be registered owner):				
	Registered Owner				
	Mailing Address				
	Contact No		Email		
2)	Property (Civic or Legal or Land Location):				
	Civic				
			Plan		
	Part	Section	Township	Range	W2
	Certificate of Title No.		Date		
3)	Present Use o	f Buildings and Proper	ty (be specific)		

4) Proposed Use of Buildings and Property (be specific)

5) Explain the need for this proposal



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Please ensure that you have provided the following:

**Application Fee** 

Required Plan

I hereby acknowledge that I have read and understood this application and I agree to:

- a) Comply with all applicable RM of McKillop bylaws including the Zoning Bylaw, and
- b) Pay the RM of McKillop a fee pertaining to the type of Application, as outlined in Bylaw No. 343/2018, The Planning Fee Bylaw.

It is expressly understood that the approval of a discretionary use application or the issuance of a development permit under this application does not relieve the applicant from complying with all the RM of McKillop bylaws even if the bylaws are not called for in the specifications or shown on plans and/or applications submitted and further, that if this permit involved or affects the placement or position of any building or structure on or in respect of land, all work shall be done so that the building or structure will be wholly within the boundaries of the lot or parcel indicated on this application.

I further agree to indemnify the RM against all losses, costs, charges, or damages caused or arising from any action undertaken pursuant to any permit issued under this application.

Name of Registered Owner

Signature of Registered Owner

Date