

FOR OFFICE USE ONLY

File No: _____

REGION OF QUEENS MUNICIPALITY

Application for Subdivision Approval

SUBDIVIDER RELATED INFORMATION

NAME OF LAND OWNER(S)

ADDRESS OF LAND OWNER(S)

POSTAL CODE

PHONE NUMBER

DOCUMENTS TO BE RETURNED TO

CORRESPONDENCE TO BE DIRECTED TO

LAND TO BE SUBDIVIDED

LOCATION

COMMUNITY

PID #

ASSESSMENT #

TYPE OF APPLICATION:

PRELIMINARY (optional)

TENTATIVE

FINAL

FEES ATTACHED:

YES

NO

TYPE OF DEVELOPMENT PROPOSED:

SINGLE UNIT DWELLING

OTHER (specify):

APPROVAL REQUESTED FOR LOT(S) #

ASSESSMENT REQUESTED FROM DEPARTMENT OF ENVIRONMENT:

YES

NO

IS THERE A REMAINDER LOT?

YES

NO

CERTIFICATION - ON-SITE SYSTEM NOT REQUIRED (unserved areas)

I certify that _____ (is, are) being subdivided for a purpose (_____)
(lot(s) being prepared and/or remainder lot) (specify purpose)

which will not require the installation of an on-site sewage disposal system.

SIGNATURE: _____

WATER SERVICES

EXISTING

PROPOSED

MUNICIPAL SYSTEM

DRILLED WELL

DUG WELL

OTHER (specify)

SEWER SERVICES

EXISTING

PROPOSED

MUNICIPAL SYSTEM

ON-SITE

OTHER (specify)

ACCESS

EXISTING

PROPOSED

PUBLIC ROAD

OTHER (specify)

I certify that I am the owner or am acting with the owner's written consent.

SIGNATURE

OF SUBDIVIDER: _____

DATE: _____