



Town of Provost
Box 449
Provost, Alberta T0B 3S0
Phone: 780-753-2261
Fax: 780-753-6889

DEVELOPMENT PERMIT APPLICATION FORM

Applicant Section (to be completed by the permit applicant):

File # _____

Owner's Name(s): _____	
Address: _____	
Phone: _____ Fax: _____ E-Mail: _____	
Contractor: _____ Phone #: _____	
Address: _____	
Architect and/or Engineer (if applicable) _____	
Project Location: _____ Tax Roll # _____	
Legal Description: Lot _____ Block _____ Plan _____	
Street Address: _____	
Project Information: _____ Estimated Completion Date: _____	
Site Plan Attached: YES/NO _____	
Parcel Size: _____ Type of Work: <input type="checkbox"/> Home Occupation	
Number of Units: _____ <input type="checkbox"/> Property Improvements	
Zoning of Land: _____ <input type="checkbox"/> Signage	
Detailed Zoning Class: _____ <input type="checkbox"/> Demolition	
Value of Works (materials and labour): _____ <input type="checkbox"/> Temporary Changes	
Description: _____	
Applicant Name (s): _____	
Address: _____	
Phone: _____ Fax: _____ E-mail: _____	
Owners Signature _____ Owners Signature _____	
<input type="checkbox"/> I am authorized to sign on behalf of all owners. (initial in box)	
Note: This application, if approved, does not constitute a Building Permit, Occupancy Permit or Business License. To obtain any of these an application and approval is required from the Municipality.	

Permit Validation Section (to be completed by the Development Officer):

Issuing Officer's Name (print) _____	Issuing Officer's Signature _____
Issuing Officer's Designation # _____	Date: _____
Municipal Planning Commission: Approved/Rejected— Date: _____	
Reasons/Conditions: _____	
Permit Fee: _____	Payment Method: _____
	Receipt Number: _____