



**CITY OF KAMLOOPS
DEVELOPMENT AND ENGINEERING SERVICES DEPARTMENT**

Phone: 250-828-3561 Fax: 250-828-7848

Email: develop@kamloops.ca

www.kamloops.ca

PRELIMINARY DEVELOPMENT REVIEW APPLICATION

Municipal Contact: _____ Application No.: _____ Date Received: _____

Applicant: _____ Email: _____

Address: _____ Postal Code: _____

Phone: _____ Fax: _____

Registered Owner: _____ Email: _____

Address: _____ (if not applicant) Postal Code: _____

Phone: _____ Fax: _____

SUBJECT PROPERTY

Legal Description: _____

Address: _____ Parcel Size: _____

Current Land Use/Zoning: _____

PROPOSED DEVELOPMENT

Proposed Use: _____

ADDITIONAL INFORMATION: (Use separate sheet if required.)

REQUIRED SUBMISSIONS

- Application Fee (\$0)
- Certificate of Title (or \$25 search fee)
- Owner Authorization
- Covenants/Rights-of-Way Registered on Title
- Detailed Floor Plan*
- Building Plans and Elevations*
- Site Plan*
- Development Checklist (North Shore **only**)

*All submitted plans and drawings shall be to a standard metric scale, shall include four full-size drawings, one set of 8½" x 11" sized drawings that can be reproduced by photocopier, one set of color elevations, and one digital copy (PDF format).

I/We _____
(Print Applicant's Name)

make application for a development review. I also certify that the information contained herein is correct to the best of my knowledge and belief. I understand that personal information collected on this form is collected for the purpose of processing this application and for administrative purposes. Personal information is collected under the authority of the Local Government Act.

(Date) _____
(Applicant's Signature)

This application is made with my full knowledge and consent.

(Date) _____
(Registered Owner's Signature)

Comments: