



CITY OF KAMLOOPS
DEVELOPMENT AND ENGINEERING SERVICES DEPARTMENT

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

Email: develop@kamloops.ca

www.kamloops.ca

DEVELOPMENT PERMIT 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:
Development Permit Area:
Current Land Use/Zoning:

PROPOSED DEVELOPMENT PERMIT

Proposed Use:

ADDITIONAL INFORMATION: (Use separate sheet if required or attach plans.)

REQUIRED SUBMISSIONS

- Application Fee \$
Renovations/Additions <\$250,000 (\$500)
New construction/renovations/additions >\$250,000 (\$1,000)
Staff Issued (\$100)
Where accompanied by a Zoning By-law amendment >\$250,000 (\$700)
Owner Authorization
Certificate of Title (or \$25 search fee)
Covenants/Rights-of-way Registered on Title
Development Checklist (North Shore only)
Site Plan
Building Plans and Elevations
Landscape Plan
Site Profile (provincial form)
Qualified Environmental Professional Report (Riparian areas only)
Geotechnical Report (Silt Bluffs only)
Tax Exemption Application (North Shore only)

1 All submitted plans and drawings shall be to a standard metric scale...
2 Landscape plans are required to be prepared by and bear the stamp of a Registered Landscape Architect...
3 Staff-issued Development Permits only apply to those applications that are for: a) Riparian area, b) site planning or landscaping Development Permits, or c) minor amendments to existing development permits.
4 Multi-family development of eight or fewer units with no zoning variances.

I/We (Print Applicant's Name)
make application under the provisions of Development Permit Procedure By-law. I agree to allow the agents of the City of Kamloops to enter onto the subject property to inspect the land and buildings. I also certify that the information contained herein is correct to the best of my knowledge and belief. I understand that this application, including any plans submitted, is public information. I authorize reproduction of any plans/reports for purposes of application processing and reporting. 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: