

Planning & Development  
5600 - 49 Street  
Beaumont, AB T4X 1A1  
780-929-8782  
development@beaumont.ab.ca

DATE RECEIVED  
OFFICE USE ONLY

DATE PAID  
OFFICE USE ONLY

**Note:**  
Building, Electrical, Plumbing, and Gas Permits each have their own application forms.

Property Information		
Street Address: _____		
Plan: _____	Block: _____	Lot: _____

Applicant and Property Owner Information	
Applicant/Contractor Name: _____	
Mailing Address: _____	
Town: _____	Postal Code: _____
Phone: _____	Cell Phone: _____
Email (required): _____	

Is the Applicant also the Registered Owner?	
<input type="checkbox"/> Yes (Do not fill out below)	<input type="checkbox"/> No (Fill out below - written authorization from registered owner required)
Owner Name: _____	
Mailing Address: _____	
Town: _____	Postal Code: _____
Phone: _____	Cell Phone: _____
Email (required): _____	

Proposed Development	Square Footage (m <sup>2</sup> ):
Check one of the following:	
<input type="checkbox"/> Commercial	
<input type="checkbox"/> Industrial	
<input type="checkbox"/> Institutional	
<input type="checkbox"/> Comprehensive Multi Family	
<input type="checkbox"/> Signage → Provide \$ Value: _____	

Description of Work and Land Usage:

Applicant Authorization	
<ol style="list-style-type: none"> <li>I am the owner/agent with the consent and authority of the owner that is the subject matter of this permit application.</li> <li>I hereby give my consent to allow any authorized person pursuant to the Municipal Government Act Section 542 the right to enter the land and/or building(s) with respect to this application only.</li> <li>I understand this is only an application and does not constitute approval to commence construction.</li> <li>I declare that the information contained in this application is correct and true to the best of my knowledge.</li> <li>I declare that I will notify the Development Authority of any proposed changes to the plans submitted with this application.</li> <li>I consent to receiving notifications &amp; correspondence regarding this application via email to the address provided on this application.</li> </ol>	
Applicant Signature: _____	Date: _____

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Development Permit	
Date Deemed Complete: _____	Date of Decision: _____ (See attached Notice of Decision)

OFFICE USE ONLY
Permit Number: _____
Mail <input type="checkbox"/> Pick-up <input type="checkbox"/>
<input type="checkbox"/> Authorization or ID Received
Land Use District: _____
Subdivision: _____
Tax Roll: _____
<input type="checkbox"/> Permitted Use
<input type="checkbox"/> Permitted Use w/ Variance
<input type="checkbox"/> Discretionary Use

Fees	Receipt #:
Development Permit: _____	_____
Variance: _____	_____
Notification Fee: _____	_____
Other: _____	_____
<b>Total Fees:</b> _____	