



Township of Esquimalt

Development Services

1229 Esquimalt Road, Esquimalt, B.C., V9A 3P1

Tel. [250] 414-7108 Fax [250] 414-7160

www.esquimalt.ca

Subdivision Application

Instructions This application is to be used when the property to be subdivided is appropriately zoned. If rezoning is required, please use a Development Application

Fees

Initial Examination Fee is \$100. plus GST
Approval Fee is \$25. plus \$10. for each lot created. [Bylaw No. 2018]

Please return the following to the Approving Officer

- ☐ Completed Application Form
- ☐ Certificate of Indefeasible Title
- ☐ 2 copies of the proposed plan of subdivision at a scale of 1:500
- ☐ Examination fee [make cheque payable to Corporation of the Township of Esquimalt]

Description of Property

Civic Address _____ **PID** _____

Legal Lot _____ Block _____ Section _____ Range _____ Plan _____

Contacts

Please print clearly

Applicant

Name		Company	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

The undersigned owner/authorized agent of the owner makes an application as specified herein, and declares that the information submitted in support of the application is true and correct in all respects.

Applicant's Signature (required)	Date
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Owner

If the applicant is NOT the owner, complete this section.

Name		Company	
Address		City	
Email		Postal Code	
Phone	Cell	Fax	

I hereby consent to the application contained herein.

Owner's Signature (required if applicant is not the owner)	Date
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Any personal information provided in this application is collected for the purpose of administering the Local Government Act, and the bylaws of the municipality under the Local Government Act, and under the authority of those enactments. Questions about the collection of the information may be directed to the Freedom of Information Officer.

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Development Details

Conventional Subdivision ☐ Yes ☐ Bare Land Strata Development Permit Area ☐ Yes ☐ No

Can the property be served by existing utilities? ☐ Yes ☐ No

Purpose of the subdivision and proposed land use: _____

Office Use Only

Examination Receipt #	Date	Initial
Approval Fee Receipt #	Date	Initial

Subdivision Application Circulation and Comments

Date of Application: _____ Roll No: _____ File: _____

Address: _____ Legal Description: _____

Comments By:

Tax Collector:

Date/Initial

Building Inspector:

Date/Initial

Engineer:

Date/Initial

Fire Chief:

Date/Initial

Planner:

Date/Initial

RETURN TO DIRECTOR, DEVELOPMENT SERVICES BY: _____

Letter to Applicant: _____

Amount of Approval Fee: _____

Final Approval: _____

Date of Approval: _____