



CITY OF WEYBURN

Zoning Bylaw Amendment

Application No.	File No.
-----------------	----------

Applicant:

Name: _____
Mail To: _____
City/Prov: _____
Postal Code: _____
Phone: _____

Owner (if different from applicant):

Name: _____
Mail To: _____
City / Prov: _____
Postal Code: _____
Phone: _____

Property:

Address: _____
Lot: _____
Block: _____

Zone: _____
Subdivision: _____
Plan: _____

Amendment is: ☐ Zoning Map (\$950.00 plus advertising) ☐ Textural (\$950.00 plus advertising)

Current Zone: _____ Proposed Zone: _____
Proposed Use Development: _____

Current Text: _____
Proposed Change or Addition: _____
Reason for the Change: _____

Information Submitted:

Please submit any additional information which would support your application for a Zoning Bylaw amendment.

I/We, as owners of the above-described property, hereby give our consent to the requested amendment. I / We hereby certify that all the above statements within this application are true, and make this solemn declaration knowing that it is of the same force and effect as if made under oath, and here by virtue of the Canada Evidence Act. I / We also understand the fee for advertising will be invoiced thereafter.

Owner / Agent

Date

Received by City Official & Date

Application Fee Received by: