

REQUEST FOR VARIANCE

OFFICE US	SE ONLY
Application No.:	Date Application Received:
DP	
Application Received By:	

CONSULTATION WITH THE PLANNING AND DEVELOPMENT DEPARTMENT IS ENCOURAGED PRIOR TO SUBMISSION OF THIS APPLICATION. THIS APPLICATION FORM MUST BE ACCOMPANIED BY THE SUBMISSION REQUIREMENTS (REFER TO SECTION 5) IN ORDER TO BE CONSIDERED A COMPLETE APPLICATION. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED UNTIL ALL INFORMATION IS PROVIDED.

1. LOCATION

Municipal Address:

LOCATION DESCRIPTION

LEGAL DESCRIPTION			
Lot:	Block:		Plan:
2. CONTACT INFORM	ATION	Unless otherwise requested, all com	munications will be sent to Agent.
LOCATION DESCRIPTION		MAILING ADDRESS	CONTACT
Property Owner(s) / Lessee			Phone:
First Name Last Name			Email:
Agent			Phone:
First Name Last Name			Email:
Architect / Designer / Planner			Phone:
First Name Last Name			Email:
Engineer			Phone:
First Name Last Name			Email:
3. DESCRIPTION OF	PROPOS	SAL Indicate one language for o	fficial communications (ex: Notice, Permit).

□ English

□ Inuktitut

□ French

4. DESCRIPTION OF PROPOSAL

DESCRIPTION OF REQUESTED VARIANCE	
List requested variances (including current zoning provision a	and proposed change):
Describe the purpose of each requested variance:	
5. SUBMISSION REQUIREMENTS	Include all required plans and studies – electronic submission preferred.
REQUIRED	PLANS AND STUDIES
 Normally the plans submitted as part of the Develop further plans are required, these will be identified by 	oment Permit application are adequate to support a variance request. If the Development Officer.
6. SWORN DECLARATION THAT IN	NFORMATION IS ACCURATE
I,solemnly declare that all of the above stateme	ents contained in the application are true and I make this
solemn declaration conscientiously believing it to	o be true and knowing that it is of the same force and effect
as if made under Oath and by virtue of <i>The Car</i>	nada Evidence Act.
Sworn or Declared Before Me	
At the City of Iqaluit	
This day of, 20	
Commissioner for Oaths	Signature of Applicant

7. AUTHORIZATION OF LESSEE/OWNER FOR AGENT TO MAKE APPLICATION

l,	, am the lessee/owner of the land that is
subject of this application and I authorize	to
make this application.	