



CYPRESS COUNTY

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File No.

SUBDIVISION APPLICATION FORM

NAME OF APPLICANT: _____

Address: _____ City: _____ Postal Code: _____

Phone #: _____ Fax#: _____

Email: _____ **Check box to give consent to receive documents electronically**

LANDOWNER(S) (if applicant not the landowner): _____

Address: _____ City: _____ Postal Code: _____

Phone #: _____ Fax #: _____ Email: _____

Interest of Applicant if not owner of property: _____

SITE INFORMATION:

Legal: (Circle One) NE NW SE SW ¼ Section _____ Township _____ Range _____ W4M
Plan _____ Block _____ Lot _____ Area: _____ hectares/acres/lot size

Municipal Address: _____ Roll#: _____

Land Use Classification: _____

Describe the existing developments on the land and whether any buildings are to be demolished or removed:

PROPOSED SUBDIVISION DETAILS:

Number of parcels being created: _____ Size of parcels being created: _____ Hectares

Reasons for subdivision: _____

PHYSICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED:

Describe the nature of the topography of the land (i.e. Flat, rolling, steep, mixed): _____

Describe the nature of the vegetation and water on the land (i.e. Brush, shrubs, tree stands, woodlot etc. & sloughs, creeks Etc.): _____

WATER AND SEWER SERVICES

Describe existing source of water: _____

Describe proposed source of water: _____

Describe existing sewage disposal: _____

Describe proposed sewage disposal: _____

