



**S.A.Y. FIRST NATION
LANDS OFFICE
SUBDIVISION, DEVELOPMENT AND
SERVICING APPLICATION FORM**



APPLICATION INFORMATION

APPLICATION TYPE: (mark all applicable boxes):		
<input type="checkbox"/> Commercial Development	<input type="checkbox"/> Industrial Development	<input type="checkbox"/> Rezoning
<input type="checkbox"/> Construction	<input type="checkbox"/> Institutional Development	<input type="checkbox"/> Roads, Intersections, etc.
<input type="checkbox"/> Development Permit	<input type="checkbox"/> Infrastructure, Sewer, Water	Other:
<input type="checkbox"/> Excavation	<input type="checkbox"/> Recreational Development	
	<input type="checkbox"/> Residential Development	
FILE#	DATE OF APPLICATION:	APPLICATION #
APPLICATION FEE \$	RECEIPT#	DATE RECEIVED:
BOND POSTED (120% of Construction Costs for on-site works)		\$
DETAILS OF BOND:		

DEVELOPER/ AGENT INFORMATION

DEVELOPER (AGENT)	CORPORATE NAME:
INCORPORATION NO.	(B.C./ Canada)
GST#	HST#
Address of Records Office:	
PHONE # (WORK)	PHONE# (CELL)
FAX#	EMAIL:
NAME OF DIRECTORS:	

Have any of the directors gone bankrupt or been a director for a corporation that has gone bankrupt in the past 5 years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please provide the name of the director and the details:		
Name of the Authorized Representative:		
Address:	Telephone:	
<input type="checkbox"/> COPY OF DIRECTORS RESOLUTION authorizing representative or an affidavit of execution or proof of authority to use the corporate seal attached to application?		
<input type="checkbox"/> A COPY OF A CORPORATION SEARCH from the past 7 days demonstrating that the corporation is in good standing.		

CP HOLDER INFORMATION (List all Certificate of Possession Holders)

All applications must be signed by both the CP Holder/Legal Interest Holder and, if there is one, the Corporate, agent or developer applicant.

By signing below 1/We hereby authorize the corporation, agent or developer listed below to apply on our behalf. 1/We agree to provide all information required for this application and to abide by all relevant S.A.Y., Federal, provincial and municipal laws in relation to the application and the project.

OWNER (CP HOLDER 1)	PHONE# (WORK)
MAILING ADDRESS:	PHONE # (CELL)
CITY/PROVINCE/POSTAL CODE	EMAIL
FAX #	SIGNATURE:
OWNER (CP HOLDER 2)	PHONE# (WORK)
MAILING ADDRESS:	PHONE # (CELL)
CITY/PROVINCE/POSTAL CODE	EMAIL
SIGNATURE	DATE
OWNER (CP HOLDER 3)	PHONE# (WORK)
MAILING ADDRESS:	PHONE # (CELL)
CITY/PROVINCE/POSTAL CODE	EMAIL
SIGNATURE	DATE
OWNER (CP HOLDER 4)	PHONE# (WORK)
MAILING ADDRESS:	PHONE # (CELL)
CITY/PROVINCE/POSTAL CODE	EMAIL
SIGNATURE	DATE
OWNER (CP HOLDER 5)	PHONE# (WORK)
MAILING ADDRESS:	PHONE # (CELL)
CITY/PROVINCE/POSTAL CODE	EMAIL
SIGNATURE	DATE

LEGAL DESCRIPTION

LOT	PLAN	Skowkale I.R. 10 Skowkale I.R. 11 Aitchelitz I.R. 9 Yakweakwioose I.R. 12
STREET ADDRESS:		
EXISTING LAND USE UNDER THE LAW- ZONING REGULATION:		
PROPOSED LAND USE (IF DIFFERENT FROM CURRENT USE):		
LEASE REGISTRATION# (as contained in Lands Registry)	SUBLEASE REGISTRATION# (as contained in Lands Registry)	

APPLICATION FOR DEVELOPMENT

TYPE	NO. OF UNITS	BLDG AREA (SQ.FT)
HEIGHT	NO. OF STOREYS	PARCEL(S) SIZE
GENERAL NATURE OF DEVELOPMENT (attach additional pages if necessary)		

CHECKLIST

I have provided all of the information and documents set out in the attached Subdivision, Development and Servicing Application Checklist	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, please provide an explanation:	

NOTE: If the applicant is not the registered owner of the property concerned, then the land owner/interest holder's signature is required on this application.

I/we hereby apply for the above approvals and agree to provide all information required for this application and to abide by all relevant S.A.Y., federal, provincial and municipal laws in relation to the application and the project.

I/we further agree to allow any authorized S.A.Y. Representative or their delegate to enquire into my/our credit history, corporate standing and all other aspects of my/our business relevant to this application.

I accept responsibility for delays in processing caused by incorrect or insufficient submissions. Contact the S.A.Y. Lands Office, if you should have any further questions.

I represent to the First Nation, knowing that the First Nation relies on this representation and warranty, that the property covered by this application, to the best of my knowledge having done due and diligent inquiry, is not contaminated or polluted in any way that would make it unlawful, unsafe or unsuited for the purpose for which it is intended to be used.

I assume all risks incidental to or that may arise as a result of the of this application and agree to save harmless and indemnify the First Nation and its officials, agents, servants and representatives from and against all claims, actions, costs, expenses and demands with respect to death, injury, loss or damage to persons or property arising out of or in connection with this application. I agree to conform to all applicable laws. I understand that no warranty is implied for the approval of this application and that this wavier and indemnity is binding on me, my heirs, executors and assigns.

I have read and agree with the above paragraphs.

Signature of Applicant/ Agent

Date

Signature of Land Owner/Interest Holder

Date

OFFICE USE ONLY

APPLICATON IS:	<input type="checkbox"/> COMPLETE	<input type="checkbox"/> INCOMPLETE (PROVIDE COMMENTS BELOW)
Comments:		
Date:	Name of Staff Member:	
Signature:		