COUNTY OF ANNAPOLIS

Municipality of the County of Annapolis
Planning Services
396 Main Street, PO Box 9
Lawrencetown, Nova Scotia Canada B0S 1M0

FOR OFFICE USE ONLY
File No._____
Receipt No._____

APPLICATION FOR SUBDIVISION APPROVAL

Please complete and return to the above address

OWNER RELATED INFORMATION

☐ Preliminary Plan ☐ Tentative Plan ☐ Final Plan ☐ Instrument

Name of Applicant (s): _____

Mailing Address: _____ Phone: _____

_____ Postal Code: _____

SPECIAL INSTRUCTIONS:

Registered Owner (s) (if not applicant): _____

Documents to be Returned to: _____

LAND TO BE SUBDIVIDED

Location: _____ Municipality: _____

Parcel Identifier: _____ Civic: _____

Abutting Property Owner(s): _____

Approval Requested for Lot(s) # _____

Type of Development Proposed: ☐ Single unit dwelling ☐ Other (Specify)_____

Assessment Requested from Department of Environment: ☐ Yes ☐ No

Is there a remainder lot? ☐ Yes ☐ No

CERTIFICATION - ON-SITE SYSTEM NOT REQUIRED (unserviced areas)

I certify that _____(is, are) being created for a purpose (_____)
(lot(s) being approved and/or remainder lot) (specify purpose)
that will not require the installation of an on-site sewage disposal system.

SIGNATURE _____

Water Services	Existing	Proposed
Municipal	☐	☐
Drilled	☐	☐
Dug Well	☐	☐
Other (specify) _____		

Sewer Services	Existing	Proposed
Municipal	☐	☐
On-site	☐	☐
Other (specify) _____		

Access	Existing	Proposed
Public Road	☐	☐
Municipal Road	☐	☐
Private Road	☐	☐
Private Right-of-Way	☐	☐
Name of Road _____		

I certify that I am the owner or acting with the owner's written consent.

Signature of Applicant(s) _____ Date _____

_____ _____