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For Office Use Only	
File #: _____	Zone: _____
Permit #: _____	Permit Fee: _____
PID #: _____	Received: _____

REZONING & AMENDMENTS APPLICATION

1. TYPE OF WORK

- Rezoning including O.P. Amendment
 Rezoning not including O.P. Amendment
 Bylaw Amendment

2. CONTACT INFORMATION

APPLICANT Name: _____ Address: _____
 Phone: _____ Cell: _____
 Email: _____ Postal Code: _____

OWNER Name: _____ Address: _____
 Phone: _____ Cell: _____
 Email: _____ Postal Code: _____

3. PROJECT INFORMATION

Project Location: _____
 Project Description: _____
 Present Zone: _____ Proposed Zone: _____
 Present Official Plan (O.P.) Designation: _____ Proposed Official Plan (O.P.) Designation: _____
 Present Use: _____ Proposed Use: _____
 Other: _____

4. RATIONALE *(Please briefly explain the rationale for the request to rezone. Include attachments if necessary.)*

5. APPLICATION REQUIREMENTS

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Application Form with Fees | <input type="checkbox"/> Legal Description and Plot Plan | <input type="checkbox"/> Other Drawings | <input type="checkbox"/> Permission from Owner |
| <ul style="list-style-type: none"> • Rezoning: \$2000 per PID • Official Plan Amendment: \$1500 per PID | <ul style="list-style-type: none"> • Showing location of property to be rezoned. | <ul style="list-style-type: none"> • Any relevant drawings of proposed development. | <ul style="list-style-type: none"> • If Applicant is not the property Owner, Owner must grant permission to apply. |

6. DECLARATION & SIGNATURE

I do solemnly declare that I am the Authorized Agent of the Owner/the Owner named in the Application and certify that the statements contained are true and complete, and are made with full knowledge of the circumstances connected with this Application.

SIGNATURE OF APPLICANT: _____ **DATE:** _____