



4512 - 46 Street
Olds AB T4H 1R5
Main: 403.556.6981
Fax: 403.507.4856
planning@olds.ca

DP # _____

Name of APPLICANT	Tel/ Cell	Fax
Address of APPLICANT		Postal Code
E-mail		
Name of REGISTERED OWNER (if different from Applicant)	Tel/ Cell	Fax
Address of REGISTERED OWNER		Postal Code
OFFICE USE ONLY Development Permit App Fee \$ 100.00		
Receipt # _____		

SIGN PROJECT INFORMATION

Processing of an application will NOT commence until all of the required items have been provided.

Address where sign is to be located:	Lot	Block	Plan
Type of Sign	Is Sign Illuminated:?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Dimensions of Sign	Height of Sign (above grade)		
Estimated Value of Sign Project	Estimated Commencement Date	Estimated Completion Date	

I hereby make application under the provisions of the Town of Olds Land Use Bylaw #01-23 for a Development Permit in accordance with the plans and supporting information submitted herein and which form part of this application.

Name of APPLICANT (Please Print)

Signature of APPLICANT

DATE

The personal information on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used in order to process this form. Please forward questions or concerns to the FOIPP Coordinator at 4512 46 Street, Olds, AB T4H 1R5. Phone 403-556-6981, Fax 403-556-6537, or email FOIP@olds.ca

Sign Permit Application – CHECKLIST

- Sign Permit Application**
 - All information must be filled in. If requested information does not apply, indicate “n/a” (not applicable).
 - Owner Authorization form must be completed & accompany application if the applicant is not the property owner.
- Site Plan**
 - Surveyor’s site plan or legible site plan must be submitted showing:
 - Legal description of property and municipal address
 - Arrow indicating direction of North
 - Property lines
 - Location of existing buildings and structures
 - Proposed location of sign
 - Other pertinent information as applicable
- Drawing or photo of proposed sign** showing dimensions, height and sign content
- Certificate of Title**
 - Current within 30 days of application (Certificates of Title may be obtained from any Alberta Registry office or the Town can order the Title for a cost of \$10)
- Sign Permit Fee**

The Development Officer may require further information to process your application.

PERMIT CONDITIONS UNDER THE TOWN OF OLDS LAND USE BYLAW:

1. The issuance of a Sign Permit (Development Permit) in accordance with the Notice of Decision is subject to the condition that it does not become effective until 21 days after the date the Permit is issued.
2. The Town of Olds Land Use Bylaw provides that any person claiming to be affected by a decision of the Development Officer may appeal to the Subdivision & Development Appeal Board (SDAB) by serving written notice of appeal to the Secretary of the SDAB within 21 days after the date the Development Permit is issued.
3. Any development proceeded with by the Applicant prior to the expiry of the 21 day period is done solely at the risk of the Applicant.
4. The Permit is effective for a period of 12 months from the date of its issue OR the date of decision of the SDAB confirming it. If, at the expiry of this period, the development has not been commenced or carried out with reasonable diligence as determined by the Development Officer, this Permit shall cease to be effective, unless an extension to this period, being no longer than an additional 12 months, has previously been given by the Development Officer.
5. The applicant is not excused from complying with the requirements of any federal, provincial or other municipal legislation, or the conditions of any easement, covenant, building scheme or agreement affecting the building or land.

Owner Authorization Form

DP # _____

PLEASE PRINT

Property Address:		
Lot	Block	Plan
<p>I hereby certify I am the Registered Owner or Agent authorized to act on behalf of the registered owner(s) of the above stated property.</p> <p>_____</p> <p>Name of <input type="checkbox"/> Registered Owner / <input type="checkbox"/> Agent</p> <p>_____</p> <p>Signature of <input type="checkbox"/> Registered Owner / <input type="checkbox"/> Agent _____</p> <p style="text-align: right;">Date</p>		

IF ABOVE SECTION IS NOT SIGNED BY A REGISTERED OWNER, THE SECTION BELOW MUST BE COMPLETED:

<input type="checkbox"/> I/we authorize the above named Agent to act on our behalf in submission of this Application.	
_____ Name of Registered Owner	_____ Name of Registered Owner
_____ Signature of Registered Owner	_____ Signature of Registered Owner
_____ Date	_____ Date
<p>Please Note:</p> <ul style="list-style-type: none"> ➤ A registered owner is required to sign. ➤ Form must be submitted with original signatures. <p>If Registered Owner or Agent is a corporation, signed documentation showing names of those who have signing authority for the corporation must also be submitted.</p> <ul style="list-style-type: none"> ➤ A registered owner is required to sign. ➤ Form must be submitted with original signatures. ➤ If Registered Owner or Agent is a corporation, signed documentation showing names of those who have signing authority for the corporation must also be submitted. 	

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