

FARM BUILDING PERMIT APPLICATION

CONTACT INFORMATION

OWNER:	_____	APPLICANT:	_____
MAILING ADDRESS:	_____	MAILING ADDRESS:	_____
CITY / PROVINCE:	_____	CITY / PROVINCE:	_____
POSTAL CODE:	_____	POSTAL CODE:	_____
PHONE NO.:	_____	PHONE NO.:	_____
EMAIL:	_____	EMAIL:	_____

PROPERTY INFORMATION

MUNICIPALITY: _____

LEGAL DESCRIPTION: _____

CIVIC ADDRESS: _____

DESCRIPTION OF WORK(S): _____

INTENDED USE OF STRUCTURE: _____

“farm building” means a building or part thereof which does not contain a residential occupancy and which is associated with or located on land devoted to the practice of farming and used essentially for the housing of equipment or livestock, or the production, storage, processing of agricultural and horticultural produce or feeds.

PROPOSED BUILDING INFORMATION

Square Footage: _____ Height: _____ Estimated Value: \$ _____

REQUIRED INFORMATION

Site Plan	<input type="checkbox"/>	Status of Title (current within 30 days of application)	<input type="checkbox"/>
Under 600 m² (6,458 sq. ft.) 2 copies of building plans which include a floor plan and elevation drawings Maximum Hard Copy Size of 11" x 17"	Over 600 m² (6,458 sq. ft.) Refer to farm building booklet for detailed building plan information required	Plan Review Fee payable by debit, cheque or cash (Please refer to fee schedule)	<input type="checkbox"/>
Farm Declaration Form (available in RRPD office or on RRPD website)			<input type="checkbox"/>

ADDITIONAL REQUIREMENTS

(Following application, RRPD to advise if further approvals are required – not an exhaustive list)

Grade Elevation (Lot Grade) Approval	<input type="checkbox"/>	Manitoba Infrastructure and Transportation Approval	<input type="checkbox"/>
Manitoba Conservation Approval	<input type="checkbox"/>	Letter of Authorization	<input type="checkbox"/>
Developers Approval	<input type="checkbox"/>	Geotechnical Report	<input type="checkbox"/>

DECLARATION

The undersigned hereby applies for a permit in accordance with this application, all municipal by-laws and provincial regulations applicable thereto.

Applicant Name: _____

Applicant Signature: _____ Date: _____

OFFICE USE ONLY:

PLAN REVIEW RECEIPT NO.:	_____	ROLL NO.:	_____
DATE OF SUBMISSION:	_____	ZONE:	_____
RECEIVED BY:	_____		