

THIS IS NOT A PERMIT



806-A Manitoba Avenue, Selkirk, MB R1A 2H4 • Phone: 204-482-3717 • Fax: 204-482-3799 • www.redriverplanning.com



GENERAL DEVELOPMENT PERMIT APPLICATION

LAND DEVELOPMENT [ ] SPECIAL EVENT [ ] OTHER [ ]
SHORELINE DEVELOPMENT [ ] TEMPORARY PLACEMENT [ ]

CONTACT INFORMATION

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

PROPERTY INFORMATION

ZONE: R.M. of St. Andrews [ ] R.M of St. Clements [ ]
ROLL NO.: R.M. of West St. Paul [ ] City of Selkirk [ ]
LEGAL DESCRIPTION: Village of Dunnottar [ ] R.M. of East St. Paul [ ]
CIVIC ADDRESS:

DESCRIPTION OF WORK(S):

REQUIRED INFORMATION

Site Plan [ ] Authorization Letter [ ]
Plans of Work to be completed (diagram and description - engineered plans may be required dependent on scope of work) [ ]
Plan Review Fee payable by debit, cheque or cash (Please refer to fee schedule) [ ]

**ADDITIONAL REQUIREMENTS (MAY BE REQUIRED)**

- |                                |                          |   |                          |
|--------------------------------|--------------------------|---|--------------------------|
| Grade Elevation Approval       | <input type="checkbox"/> | Manitoba Infrastructure and Transportation Approval | <input type="checkbox"/> |
| Manitoba Conservation Approval | <input type="checkbox"/> | Department of Highways Approval                     | <input type="checkbox"/> |
| Developers Approval            | <input type="checkbox"/> | Geotechnical Report                                 | <input type="checkbox"/> |
| SETC Approval                  | <input type="checkbox"/> | Proof of Ownership                                  | <input type="checkbox"/> |

**No change from the plans and specifications, building location or the terms of this permit, is allowed unless authorized in writing by the Red River Planning District**

**Please be advised that all items noted as required, must be submitted to Red River Planning District**

**Incomplete applications will not be accepted**

**The non-refundable Plan Review fee and this application is only valid for 6 months from the initial date of submission**

**DECLARATION**

I, the undersigned, \_\_\_\_\_ (please print), am the authorized agent/owner named in this application for a building permit. I acknowledge that:

1. All statements and representations contained in this application for permit and the plans and specifications are correct, accurate and adhere to all applicable legislation, by-laws, codes and standards;
2. I am responsible for searching all caveats registered on the title and ensuring that the construction complies with the caveats;
3. I am responsible for ensuring the construction complies with any development agreement registered against the title;
4. No change from the plans and specifications, building location or the terms of this permit, is allowed unless authorized in writing by the Red River Planning District;
5. The Red River Planning District is relying upon the statements and representations made in this application and in the plans and specifications in considering this application;
6. The issuance of a permit by the Red River Planning District does not waive, amend, or change any requirements in another by-law or provincial law and regulations; and I am responsible to ensure that the construction complies with any requirement in another by-law or provincial law and regulations. I understand that this may require me to apply to other agencies requiring permits/approvals;
7. The Red River Planning District is not responsible for any claim, loss or damage caused by (1) an error, omission, or incorrect information contained in this application or the submitted plans and specifications, (2) this application for permit and the plans and specifications not adhering to all applicable legislation, by-laws, codes and standards, or (3) my failure to comply with the terms of this permit;

Signature of authorized agent: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

**PLAN REVIEW RECEIPT NO.:** \_\_\_\_\_

**DATE OF SUBMISSION:** \_\_\_\_\_

**RECEIVED / VALIDATED BY:** \_\_\_\_\_  
(SIGNATURE OF RRPD STAFF)