



VILLAGE OF BELCARRA

"Between Forest and Sea"

4084 BEDWELL BAY ROAD, BELCARRA, B.C. V3H 4P8
TELEPHONE 604-937-4100 FAX 604-939-5034
belcarra@belcarra.ca • www.belcarra.ca



OCP AMENDMENT, REZONING AND DEVELOPMENT PERMIT APPLICATION (PLEASE PRINT)

Mail to above address or email to belcarra@belcarra.ca

Office Use Only File Number: _____ Fees: _____ Receipt Number: _____ Received By: _____ Associated Files: _____	Office Use Only for Referral <input type="checkbox"/> Building Services <input type="checkbox"/> Municipal Planner <input type="checkbox"/> Municipal Engineer <input type="checkbox"/> Engineering & Public Works <input type="checkbox"/> Sasamat Volunteer Fire Department <input type="checkbox"/> School District No. 43	<input type="checkbox"/> Fee Simple <input type="checkbox"/> Bare Land Strata <input type="checkbox"/> Strata Conversion <input type="checkbox"/> Phased Strata <input type="checkbox"/> Road Closure <input type="checkbox"/> Extension
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Fees are not refundable except as outlined in the Fees and Charges Bylaw and do not guarantee approval of application in any way.

TYPE OF APPLICATION
<input type="checkbox"/> Rezoning Application <input type="checkbox"/> OCP Amendment <input type="checkbox"/> Development Permit

APPLICANT INFORMATION
Name:
Company (if applicable):
Address:
Phone Number:
Email:

OWNER INFORMATION
Please check if the following applies: <input type="checkbox"/> same as applicant information
Name of Owner(s) or Authorized Signatory:
Company Name (if applicable, provide corporate search):
Address:
Phone Number:
Email:

Are there any easements or restrictive covenants affecting the property? ___ Yes ___ No
If yes, please provide copies with the current title search for all properties.

PROPOSAL

Proposal Description

Describe the proposed development (add description on supplemental sheets as necessary):

Letter of Intent

Paste below or upload 1 copy of your Letter of Intent and upload any additional supplemental sheets.

Proposed Lots (add supplemental sheets as necessary):

Lot number(s)*	Proposed use(s) of lot	Lot area

* The lot number should be used in identifying the lot on the preliminary plan.

Other applications being submitted concurrently:

Type (e.g. Development Permit, Development Variance Permit, Subdivision, Rezoning, OCP Amendment)	Application Number (completed by staff)
1.	
2.	
3.	

APPLICANT ACKNOWLEDGEMENT

By signing this application form, the applicant / owner attests that the information provided on this and supplemental application forms for land use permits from the Village of Belcarra is true and correct to the best of their knowledge. Any material falsehood or any omission of a material fact made by the applicant / owner with respect to this application may result in an issued permit becoming null and void.

I, the applicant / owner, certify that this application is being made with the full knowledge and consent of all owners of the property in question.

Applicant or Authorized Representative Signature

Date

APPOINTMENT OF AGENT

If you are applying on behalf of the registered owner of a property, you are required to provide:

- Agent Authorization Form [\[link\]](#)
- Corporate Search (if the registered owner is a company)

The Village of Belcarra is collecting personal information in accordance with Section 26 (c) of the Freedom of Information and Protection of Privacy Act. The personal information collected on this form is collected as part of the subdivision application process and for administration and enforcement. Questions about the collection, use and disclosure of this information can be directed to the Village's Privacy Officer at the Village of Belcarra, 4084 Bedwell Bay Road, Belcarra, BC V3H 4P8. Phone 604-937-4100 or email foi@belcarra.ca.