

**Town of Blackfalds
DEVELOPMENT PERMIT APPLICATION
CANNABIS RETAIL STORE**

PLANNING DEPARTMENT FILE CHECKLIST

Required Information:		Submitted (to be completed by Applicant)	Office Use Only
1.	Completed Application Form	<input type="checkbox"/>	<input type="checkbox"/>
2.	Payment of Application Fee	<input type="checkbox"/>	<input type="checkbox"/>
3.	Site Plan in Accordance with the Requirements listed below	<input type="checkbox"/>	<input type="checkbox"/>
4.	Floor Plans in Accordance with the Requirements listed below	<input type="checkbox"/>	<input type="checkbox"/>
5.	Owner's Authorization – Signature on Application form or Letter/Email	<input type="checkbox"/>	<input type="checkbox"/>
6.	Letter of Intent – Business Description, Proposed Hours of Operation, Number of Staff	<input type="checkbox"/>	<input type="checkbox"/>

Plan Requirements:		Submitted (to be completed by Applicant)	Office Use Only
1.	Scale of Plan	<input type="checkbox"/>	<input type="checkbox"/>
2.	North Arrow	<input type="checkbox"/>	<input type="checkbox"/>
3.	Municipal Address and Legal Description of Property	<input type="checkbox"/>	<input type="checkbox"/>
4.	Outline of all Buildings and/or Structures on the Site	<input type="checkbox"/>	<input type="checkbox"/>
5.	Outline of Specific Unit to be Occupied	<input type="checkbox"/>	<input type="checkbox"/>
6.	Layout of Interior – Doors, Windows, Dimensions and Room Labels	<input type="checkbox"/>	<input type="checkbox"/>
7.	Layout of Existing and Proposed Parking Areas	<input type="checkbox"/>	<input type="checkbox"/>

Additional Plans and Information: (In accordance with Land Use Bylaw 1198/16 and amendments thereto, the Development Officer/Authority may require additional information and plans)		Submitted (to be completed by Applicant)	Office Use Only
1.	Copy of AGLC Application (if available)	<input type="checkbox"/>	<input type="checkbox"/>
2.	Any other information required by the Development Officer/Authority to determine how the proposed development may affect land uses in the vicinity.	<input type="checkbox"/>	<input type="checkbox"/>

FOR OFFICE USE ONLY

Lot: _____ Block: _____ Plan: _____ Land Use District: _____ Tax Roll #: _____

Variance Requested (if applicable): MPC Development Officer

Development Permit #: _____

The personal information provided as part of this application is collected under the authority of the Section 3 of the Alberta Municipal Government Act (MGA), Section 23 of the Freedom of Information and Privacy Act (FOIP), Town of Blackfalds Land Use Bylaw 1198.16 (and amendments thereto) and the Alberta Safety Codes Act (SCA), and will be used by the Town for issuing permits, safety codes compliance verification, and monitoring and property assessment purposes. The applicant's name and the nature of the permit will be publicly available. Collected personal information is protected under Part 2 of the FOIP act, from unauthorized access, collection, use, and disclosure, and can be reviewed and corrected upon request. Questions regarding the collection, use and disclosure of personal information may be directed to the Town of Blackfalds FOIP Coordinator, Box 220, 5018 Waghorn Street, Blackfalds AB, T0M 0J0; by email at foip@blackfalds.com; or by calling 403.885.6248.