ORRSC

OLDMAN RIVER REGIONAL SERVICES COMMISSION

PLANNING & GIS FOR STRONG COMMUNITIES

SUBDIVISION APPLICATION – WITHDRAWAL FORM

ORRSC Subdivision File #:	Date Received:

CONTACT INFORMATION

Name of Registered Owner: _____

Mailing Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Preferred Method of Correspondence: Email ☐ Mail ☐ Both ☐

Applicant: Same as above ☐

Name of Applicant: _____

Mailing Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Preferred Method of Correspondence: Email ☐ Mail ☐ Both ☐

LEGAL DESCRIPTION

All/part of the _____ ¼ Section _____ Township _____ Range _____ West of _____ Meridian

(e.g. SE¼ 36-1-36-W4M)

Being all/part of: Lot/Unit _____ Block _____ Plan _____

(403)-329-1344
1-844-279-8760

3105 16 Avenue North
Lethbridge, AB T1H 5E8

subdivision@orrsc.com
www.orrsc.com

REASON FOR WITHDRAWAL

NOTICE

By signing below the Applicant acknowledges that the subdivision fees are **non-refundable**.

For a subdivision application which has a conditional approval, the applicant is advised that by signing this form, it is acknowledged that the approval will be **void** and any future proposal will require a new application to be made.

Print Name

Signature of Registered Owner(s) or Applicant

Date

Personal information collected on this form is collected in accordance with Section 653 of the Alberta Municipal Government Act. This information may also be shared with appropriate government/other agencies and may also be kept on file by those agencies. The application and related file contents will become available to the public and are subject to the provisions of the Access to Information Act and Protection of Privacy Act.

If you have any questions about the information being collected, contact the Oldman River Regional Services Commission Privacy Coordinator at 403-329-1344.

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