



DEVELOPMENT PERMIT APPLICATION

FOR OFFICE USE ONLY	
APPLICATION NO.	
ROLL NO.	
RENEWAL OF	
FEES PAID	
DATE OF RECEIPT	

APPLICANT/OWNER						
Applicant Name: B&A Planning Group	Email: kvenner@bapg.ca					
Business/Organization Name (if applicable):						
Mailing Address: #600, 215 - 6 Ave SW Calgary, AB	Postal Code: T2P 1K3					
Telephone (Primary): 403-692-4530	Alternative:					
Landowner Name(s) per title (if not the Applicant): 1410266 Alberta Ltd.						
Business/Organization Name (if applicable):						
Mailing Address: 1945 Briar Crescent Calgary AB	Postal Code: T2N 3V6					
Telephone (Primary): 403-390-4567	Email:					
LEGAL LAND DESCRIPTION - Subject site						
All/part of: NW & SW ¼	Section: 31	Township: 26	Range: 3	West of: 5	Meridian	Division: 9
All parts of Lot(s)/Unit(s):		Block:	Plan:	Parcel Size (ac/ha):		
Municipal Address:				Land Use District: Direct Control District #170		
APPLICATION FOR - List use and scope of work						
Natural Resource Extraction/Processing Facility as per adopted Summit Pit Master Site Development Plan						
Variance Rationale included: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A				DP Checklist Included: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
SITE INFORMATION						
a. Oil or gas wells present on or within 100 metres of the subject property(s)					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
b. Parcel within 1.5 kilometres of a sour gas facility (well, pipeline or plant)					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
c. Abandoned oil or gas well or pipeline present on the property (Well Map Viewer: https://extmapviewer.aer.ca/AERAbandonedWells/Index.html)					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
d. Subject site has direct access to a developed Municipal Road (accessible public roadway)					<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
AUTHORIZATION						
I, <u>Ken Venner</u> (Full name in Block Capitals), hereby certify (initial below):						
<u> </u> That I am the registered owner OR <u> X </u> That I am authorized to act on the owner's behalf.						
<u> X </u> That the information given on this form and related documents, is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application.						
<u> X </u> That I provide consent to the public release and disclosure of all information, including supporting documentation, submitted/contained within this application as part of the review process. I acknowledge that the information is collected in accordance with s.33(c) of the <i>Freedom of Information and Protection of Privacy Act</i> .						
<u> X </u> Right of Entry: I authorize/acknowledge that Rocky View County may enter the above parcel(s) of land for purposes of investigation and enforcement related to this application in accordance with Section 542 of the Municipal Government Act.						
Applicant Signature <u></u>				Landowner Signature _____		
Date <u>April 23, 2021</u>				Date _____		