



# Town of Digby

File #: \_\_\_\_\_

147 First Avenue  
P.O. Box 579, Digby, NS B0V 1A0  
Telephone: (902) 245-4740 Facsimile: (902) 245-2121

## Application for Development Agreement

### OWNER INFORMATION:

NAME:		
MAIL ADDRESS:	POSTAL CODE	
TELEPHONE: ( )	FACSIMILE: ( )	E-MAIL:

### APPLICANT INFORMATION: (IF DIFFERENT FROM OWNER)

NAME:		
MAIL ADDRESS:	POSTAL CODE	
TELEPHONE: ( )	FACSIMILE: ( )	E-MAIL:

### PROJECT INFORMATION:

PROPERTY PID:	CIVIC ADDRESS:
PROJECT DESCRIPTION:	

### LAND & BUILDING INFORMATION:

PRESENT LAND & BUILDING USE:
PROPOSED LAND & BUILDING USE:

**PLOT PLAN:** SKETCH PROPERTY & BUILDING(S) COMPLETE WITH DIMENSIONS, STREETS AND NORTH ARROW

**Note**  
Development Activity within the Town of Digby may require approvals and/or permits from other Municipal, Provincial or Federal agencies. It is the responsibility of the applicant/agent or owner to ensure that all required Municipal, Provincial and/or Federal permits and approvals are acquired for the development prior to the commencement of development related activities. Issuance of any relevant Municipal approval does not exempt the applicant or property owner from any and all relevant regulatory requirement.

**I HEREBY DECLARE:**

- THAT I AM THE OWNER / AUTHORIZED AGENT OF THE OWNER NAMED IN THIS DEVELOPMENT PERMIT APPLICATION.
- THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND MADE WITH FULL KNOWLEDGE OF ALL CIRCUMSTANCES ASSOCIATED WITH THIS APPLICATION.
- THAT I AGREE TO COMPLY WITH THE BY-LAWS OF THE TOWN OF DIGBY AS THEY RELATE TO DEVELOPMENT DESCRIBED IN THIS APPLICATION.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE