



TOWN OF KINDERSLEY DISCRETIONARY USE APPLICATION

(This application is subject to Town of Kindersley Council approval)

1. PROPERTY OWNER (APPLICANT):

Application No. (DU #) _____

NAME: _____ Email: _____

Civic Address: _____ P.O.Box # _____ Postal Code _____

Phone #: Res: _____ Cell: _____ Work: _____ Fax: _____

LEGAL LAND DESCRIPTION: _____ ¼ Section: _____ Township: _____ Range: _____ West of the 3rd Meridian

Lot or Parcel _____ Block _____ Registered Plan No _____ Certificate of Title No _____

2. ZONING DISTRICT:

- | | |
|--|--|
| <input type="checkbox"/> R1 Low Density Residential | <input type="checkbox"/> C2 Core Commercial |
| <input type="checkbox"/> R2 Medium Density Residential | <input type="checkbox"/> C3 Highway Commercial |
| <input type="checkbox"/> R2A Small Lot Residential | <input type="checkbox"/> C4 Shopping Centre Commercial |
| <input type="checkbox"/> R3 Multiple Unit Residential | <input type="checkbox"/> C5 Neighborhood Commercial |
| <input type="checkbox"/> R3A Low Density Multiple-Unit Residential | <input type="checkbox"/> M1 Light Industrial |
| <input type="checkbox"/> R4 Mobile Home Residential | <input type="checkbox"/> M2 Heavy Industrial |
| <input type="checkbox"/> RA Acreage Residential | <input type="checkbox"/> RW Railway Industrial |
| <input type="checkbox"/> C1 Downtown Commercial | <input type="checkbox"/> FUD Future Urban Development |

3. PROPOSED DISCRETIONARY USE:

4. OTHER REQUIRED INFORMATION:

- a) Will you require signage? _____ *If so, please complete and attach a sign permit application*
- b) What is the anticipated traffic flow for your intended use? _____
- c) Does your property have the appropriate parking requirements, that take into account the number of vehicles and loading requirements needed? _____
- d) What is the expected number of daily visitors/customers? _____
- e) Will your intended use create noise, vibration, smoke, dust, odours, heat, glare, electrical, television or radio interference detectable beyond the boundaries of the building? Yes No
If yes, please provide details: _____
- f) Is this a Homebased business proposed use? Yes No
If so, please answer the following:
 Are there any other home businesses at this address? Yes No
 Will the home business use more than 20% of the gross floor area? Yes No
 Will there be any employees? _____ If yes, how many? _____

5. DECLARATION OF THE APPLICANT:

I _____ of the Town of Kindersley in the Province of Saskatchewan solemnly declare that the above statements contained within this application are true, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the "Canada Evidence Act".

Date _____ Signature _____

***** **FOR USE BY TOWN OFFICE ONLY** *****

DU APPLICATION NUMBER: (DU #) _____ APPLICATION RECEIVED DATE: _____

DU APPLICATION FEE: \$ _____ FEE RECEIVED DATE: _____