

Infrastructure and Transportation Highway Planning and Design 1420 - 215 Garry Street Winnipeg MB Canada R3C 3P3 Fax: (204) 945-0593 Tel: (204) 945-3660

APPLICATION FOR STRUCTURE AND/OR ACCESS WITHIN A CONTROLLED AREA ADJACENT TO PROVINCIAL ROADS

This application must include the following:

- 1. Copy of the land title certificate
- 2. Sketch showing location of requested construction and or tree planting
- 3. If subdivision is involved, evidence of approval or tentative approval by the Subdivision Approving Authority must be submitted or this application will not be
- 5

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	0.00 application fee pay plication will not be proc								
CHE	CK ONE OR MOR	RE OF THE	FOLLOWING	:					
	Construct an Access Driveway			Construct a Fr	ontage/Service Road		Construct a Public Roa	ad	
	Relocate an Existing Driveway				Modify/Widen an Existing Driveway				
	Erect a Structure				Construct an addition to a Structure Plant trees and/or shrubs				ıbs
THIS	APPLICATION, IF APP	ROVED, DC	ES NOT DISPENS	E WITH T	HE HOLDER TH	EREOF COMPLYING WITH A	ALL TERMS AN	ID CONDITIONS OF A	NY
MUNI	CIPAL BY-LAW OR ZO	MING REGU	JEATION		PLEASE PRI	NT	· -		
	Highway No. (s)				Land Title No.				
							···		
	_				Ť				
						Land Title Office			
	_					lage, Community of	.		
	Location of reque	ested access	m fr	rom	_ corner of prop	erty Proposed top o	of access (width	1):	_ m
F	PROPERTY SIZE								
	Frontage on highway:_				_ m		-lectares		
F	PROPOSED USE								
	Agricultural		Residential		Commercial	Other			
	Subdivision has or will	be applied fo	or this property		Yes (File No.)	No	
	ロロヘロへらだり くてむし	UCTURES	(All existing struct	ures includ	ling access must	be shown on accompanying s	sketch)		
	PROPOSED STRE							<u></u>	•
1 _	:	size	m x		m	setback from right of way (pr	operty line)		— '''
2	;	size	m x		m	setback from right of way (pr	operty line)		m
3	:	size	m x		m	setback from right of way (pr	operty line)		m
· –			_			setback from right of way (pr	onerty line)		m
4 –		size	m x		m	Semack from right of way (pr	oporty into		
REG	ISTERED LANDO	WNER			APPLICAN	Т			
	Name				Name				
A	Address				Address				
	vn/Prov		Postal Code		Town/Prov		Postal Code		
	Tel No.		Fax No		Tel No.		Fax No.		
Si	gnature				Signature				
					Representing		<u></u>		
					Date				
									an and a second
FOR	DEPARTMENT L	ISE ONLY	The second secon						
	\$50.00 Application F	ee Received	/	MM	/ YY	Region No		•	
Fee Received by					Cash, Cheque, Money Order No.				
Control Section					Air Photo No.				
Sketch Plan No.									
DEM	IARKS:								
KEIV	IARNO:								
	,								

SIGNED: TECHNICAL SERVICES ENGINEER