



Zoning & Land Use Compliance Declaration

**PLEASE PRINT AND COMPLETE THIS FORM CAREFULLY
INSUFFICIENT OR INCORRECT INFORMATION MAY DELAY PROCESSING AND/OR IMPACT THE
ABILITY TO APPROVE THE PERMIT APPLICATION**

Information on properties within the SCRD can be found using the Interactive Maps tools available at scrd.ca/mapping SCRD Zoning Bylaws and Official Community Plans can be viewed at scrd.ca/planning

LEGAL DESCRIPTION:

Lot	Block	District Lot	Plan	PID	Folio
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CIVIC ADDRESS (if already assigned):

House Number	Unit	Street
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OFFICIAL COMMUNITY PLAN, ELECTORAL AREA AND ZONING BYLAW (PLEASE SELECT ZONING BYLAW AND ELECTORAL AREA FOR PARCEL)					
<input type="checkbox"/> Bylaw 337:	<input type="checkbox"/> AREA A EGMONT/PENDER HARBOUR				
<input type="checkbox"/> Bylaw 722:					
<input type="checkbox"/> AREA B Halfmoon Bay	<input type="checkbox"/> AREA D Roberts Creek	<input type="checkbox"/> AREA E Elphinstone	<input type="checkbox"/> AREA F West Howe Sound	<input type="checkbox"/> TWIN CREEKS	<input type="checkbox"/> HILLSIDE/ PORT MELLON

PARCEL ZONING:	_____			
PARCEL SIZE:	_____			M ²
PARCEL COVERAGE				
PERMITTED:		%		M ²
EXISTING:		%		M ²
PROPOSED:		%		M ²
TOTAL:		%		M ²
<input type="checkbox"/> INFORMATION PROVIDED IS INCLUDED ON SUBMITTED DRAWINGS				

	PERMITTED		PROPOSED	
SETBACKS				
FRONT:		M		M
REAR:		M		M
SIDE 1:		M		M
SIDE 2:		M		M
OTHER: (ie.watercourse)		M		M
BUILDING HEIGHT				
		M		M

Is the property within a Development Permit Area (DPA)? If yes, is the proposed construction within the DPA? If yes, what is the status of the Development Permit (DP) application?	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Applied <input type="checkbox"/> Issued <input type="checkbox"/>
Have you reviewed any covenants, easements or statutory right of ways listed on title?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you verified the intended use of the proposed construction?	Yes <input type="checkbox"/> No <input type="checkbox"/>

For additional information and/or clarification related to the above, please contact the SCRD Planning Division at planning@scrd.ca

I CERTIFY TO THE BEST OF MY UNDERSTANDING THAT THE INFORMATION PROVIDED IS ACCURATE AND ACCEPT FULL RESPONSIBILITY FOR ANY INCORRECT OR OMITTED INFORMATION THAT MAY IMPACT THE PROCESSING OF THE PERMIT APPLICATION.

Property Owner / Authorized Agent Signature Required →	Date:
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