



**Town of Bauline**  
**2 Memorial Park Place**  
**Bauline, NL**  
**A1K 0M5**

Telephone: (709) 335-2483  
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**DEVELOPMENT APPLICATION**

File No: \_\_\_\_\_  
 (Leave Blank)

Application for: Approval in Principle  Development Permit

Applicant \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Location \_\_\_\_\_

**DESCRIPTION OF PROPOSED DEVELOPMENT**

Number of Lots \_\_\_\_\_ Estimated Cost of Development

**APPLICATION TO:**

Construct  Extend  Subdivide  Change Use  Erect

**TYPE OF DEVELOPMENT**

Residential \_\_\_\_\_ Commercial (Please Specify) \_\_\_\_\_ Other (Please Specify) \_\_\_\_\_  
 Dwelling \_\_\_\_\_ Commercial \_\_\_\_\_ Other \_\_\_\_\_  
 Seasonal Dwelling \_\_\_\_\_ Bus/Office \_\_\_\_\_

Size of land to be developed: Width \_\_\_\_\_ m Depth \_\_\_\_\_ m Area \_\_\_\_\_ m

**EXISTING USES OF LAND (PLEASE CHECK APPROPRIATE BOX AND SPECIFY)**

Residential  \_\_\_\_\_ Commercial  \_\_\_\_\_ Other  \_\_\_\_\_

**DESCRIBE DEVELOPMENT (BUILDING, EXTENSION, ALTERATION)**

Use	Size	Height	Building Line Setback
_____	_____ mx _____ m	_____ m	_____ m

List any buildings to be demolished \_\_\_\_\_

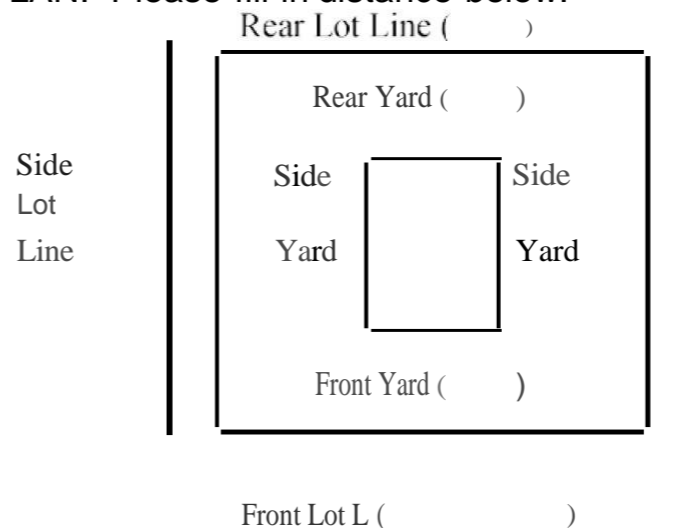
**PROPOSED MEANS OF SERVICING**

Municipal Water   
 On-site Well   
 On-site Septic Tank

**PROPOSED MEANS OF ACCESS**

Existing Access   
 New Access (please specify)  \_\_\_\_\_

**PLOT PLAN: Please fill in distance below.**



STREET (name of street \_\_\_\_\_)

I, \_\_\_\_\_ of Bauline, declare that this application is made with a full knowledge of the circumstances and that the location and plot plan submitted is correct.

Dated at Bauline this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

SIGNED \_\_\_\_\_

**FOR OFFICE USE ONLY**

Yes No

1. Location Plan(s)
2. Site Plan(s)
3. Survey Plan(s)
4. Building Plan(s)
5. Application Fee

Receipt No. \_\_\_\_\_