COUNTY OF ST. PAUL REZONING APPLICATION
Name of Applicant: Luthind Enterprises Inc. Email: luthind @ outlook. com
Mailing Address: #10, 3908-97 street Edmonton, AB TOE 6Na
Telephone (Home):(Business): 780.371. 4605 (Fax):
Registered Owner (if not applicant): Ms. Jean Edwards
Mailing Address: #40a, 164a5-109 Street NW Edmonton, AB TSX aKI
Telephone (Home): 780.456.5932 (Business): (Fax):
1. LEGAL DESCRIPTION OF LAND TO BE REZONED: 512 OF SE-6-57-6 WHM
a) All / part of the¼ 6 section 57 township 6 range W4M
b) Being all / parts of Lot Block Registered Plan
c) Total area of the above parcel of land to be rezoned is 18.9 acres(hectares)
2. ZONING INFORMATION:
a) Current Zoning as per the Land Use Bylaw 2013-50: Agriculture (A) District 8.2
b) Desired Zoning as per the Land Use Bylaw 2013-50: Industrial Commercial District (1c) 8.7
c) Proposed use as per the Land Use Bylaw 2013-50: Industrial Shop Light Repairs
d) Is the proposed use a permitted or discretionary use: Permitted & Discretionary Industrial Repair Trucking
e) Is the proposed parcel located within an Area Structure Plan or Inter-municipal Development Plan?
f) Information in support of the rezoning: Business Development: Job creation oppurtunity In the area of EIK Point: County of St. Paul region. Space is needed to expand work and for equipment management for sofe use.

3.	LO	ATION OF LAND TO BE REZONED:	
	a)	Is the land situated immediately adjacent to the municipal boundary?	_
		If "yes", the adjoining municipality is * Note: Referral Land * EIKPoint, AB.	
	b)	Is the land situated within 0.8 kilometres of the right-of-way of a highway? YesNo	
	c)	If "yes" the highway is No. See Diagram Attached, Land runs parallel to Highway 646 Does the proposed parcel contain or is it bounded by a river, stream, lake or body of water, or by a canal or	<u>)</u>
		If "yes", state its name Lac Dufresne Laxe Yes No	_
	d)	Are there any oil/gas wells on or within 100 metres of the subject property(s)? YesNo	
	e)	Is the proposed parcel within 1.5 kilometres of a sour gas facility?	_
		i) Is the sour gas facility active, abandoned, or currently being reclaimed?	-
	g)	Is there an abandoned oil or gas well or pipeline on the property?	_
	*Fc	r a listing of EUB wells in a specific area, contact the Information Services Group at the EUB (403) 297-8190.	
	h)	Is the proposed parcel within 1.5 km of a Confined Feeding Operation?	_
	ii)	Does the proposed parcel contain a slope greater than 15% Yes No	-
4.	PH	SICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED:	
	a)	Describe the nature of the topography of the land (flat, rolling, steep, mixed) Flat w Some brush	<u></u>
	b)	Describe the nature of the vegetation & water on the land (brush, shrubs, tree stands, sloughs, creeks, etc.)	
	(Shrubs on WE portion of the land, Overall Flat	
5.	WA	TER SERVICES:	
	a)	Existing Source of Water: None	<u></u>
	b)	Proposed water source (if not rezoning parcel in its entirety). Proposed water supply to new lots by a licensed (surface)water distribution system; Proposed water supply to new lots by cistern and hauling; Proposed water supply to new lots by individual water wells.	

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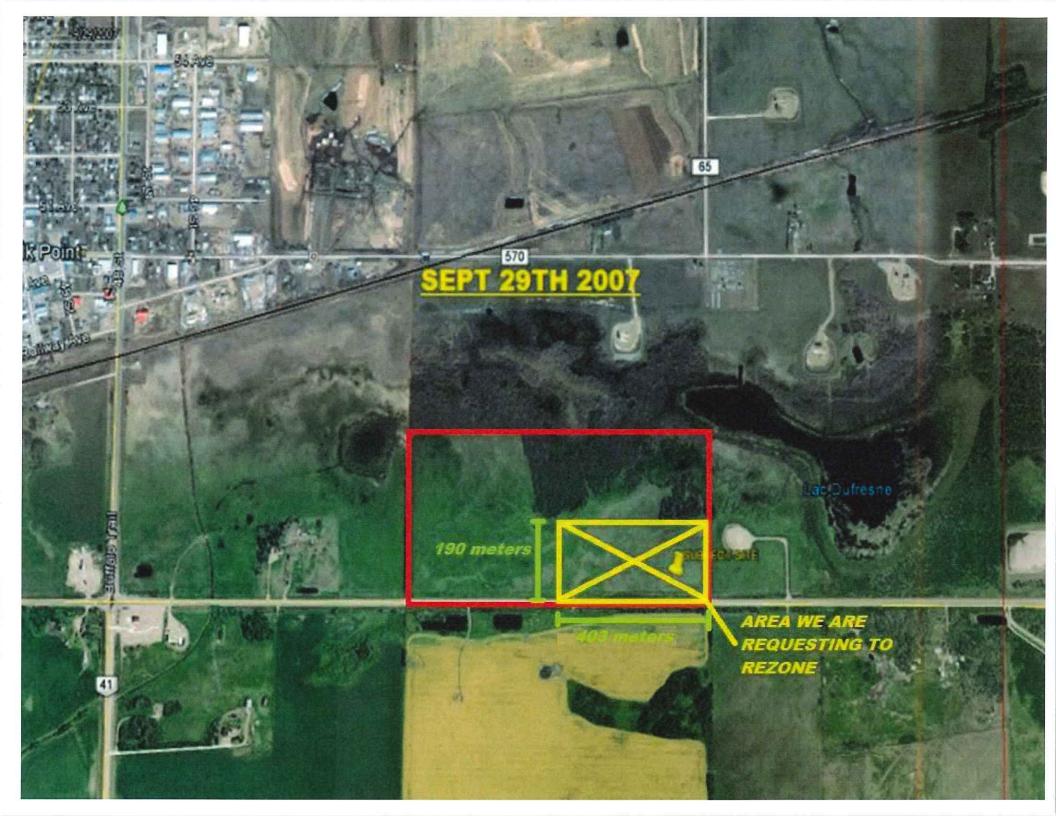
6.	EWER SERVICES:			
	a) Existing sewage disposal: None			
	b) Proposed sewage disposal: <u>Sepetic Tank</u>			

An existing sewage system must comply with the above setbacks (existing and/or proposed).

	Property Line	Water Source	Building	Septic Tank	Basement	Water Course
Holding Tanks	1 metre	10 metres	1 metre			10 metres
Treatment Mound	3 metres	15 metres	10 metres	3 metres	10 metres	15 metres
Field System	1.5 metres	15 metres	10 metres	5 metres	10 metres	15 metres
Open Discharge	90 metres	50 metres	45 metres			45 metres
Lagoons	30 metres	100 metres	45 metres			90 metres
Packaged Sewage Treatment Plants	6 metres	10 metres	1 metre			10 metres

The personal information provided will be used to process the Rezoning Application is collected under the authority of Section 642 of the Municipal Government Act. Personal information you provide may be made public pursuant to the provisions of the Freedom of Information and Protection of Privacy (FOIP) Act, including Section 39 through 42 therein. If you have any questions about the collection and use of this information, please contact the FOIP Coordinator of the County of St. Paul at 780.645.3301.

hereby certify that (check one):				
☐ I am the registered owner; or				
I am authorized to act on behalf of the registered own	ner			
and that the information given on this form is full and con statement of the facts relating to this application for rezo	· · · · · · · · · · · · · · · · · · ·			
Agent Signature	October 16, 2014.			
See Attached Letter.	October 16, 2014			
Owner Signature	Date			



General Location Map

