COUNTY OF ST. PAUL REZONING APPLICATION
Name of Applicant: Michael & Jennifer Machura Email:
Mailing Address:
Telephone (Home): (Business): (Fax):
Registered Owner (if not applicant): Same, as above
Mailing Address:
Telephone (Home):(Business): (Fax):
1. LEGAL DESCRIPTION OF LAND TO BE REZONED:
a) All / part of the 5W 1/4 7_section 58_township 9_range W4M
b) Being all / parts of Lot 02 Block Registered Plan
c) Total area of the above parcel of land to be rezoned is $28.66$ acres(hectares)
2. ZONING INFORMATION:
a) Current Zoning as per the Land Use Bylaw 2013-50: Agriculture
b) Desired Zoning as per the Land Use Bylaw 2013-50: Country Residential One
c) Proposed use as per the Land Use Bylaw 2013-50: Single Detached Dwellings
d) Is the proposed use a permitted or discretionary use: Permitted
e) Is the proposed parcel located within an Area Structure Plan or Inter-municipal Development Plan?
f) Information in support of the rezoning:  - Property is in close proximity to St. Paul 4 is  desirable to accorge owners!
- My Son would like to build a home on one parcel.

3.	LC	CATION OF LAND TO BE REZONED:			
	a)	Is the land situated immediately adjacent to the municipal boundary?	Yes	No .	
		If "yes", the adjoining municipality is			()
	b)	Is the land situated within 0.8 kilometres of the right-of-way of a highway?	Yes V	No	
		If "yes" the highway is No.			
	c)	Does the proposed parcel contain or is it bounded by a river, stream, lake or bo drainage ditch?	dy of water, or by	a can	al or
		If "yes", state its name	Yes	No _	
	d)	Are there any oil/gas wells on or within 100 metres of the subject property(s)?	Yes	_No _	
	e)	Is the proposed parcel within 1.5 kilometres of a sour gas facility?	Yes	No _	i/
		i) Is the sour gas facility active, abandoned, or currently being reclaimed?	<del> </del>		
	g)	Is there an abandoned oil or gas well or pipeline on the property?	Yes	No _	
	h)	Is the proposed parcel within 1.5 km of a Confined Feeding Operation?	Yes	No _	
	ii)	Does the proposed parcel contain a slope greater than 15%	Yes	No _	
4.	DLI	SICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED:			
4.	T I I	ISICAL CHARACTERISTICS OF LAND TO BE SUBDIVIDED.	ri f		
	a)	Describe the nature of the topography of the land (flat, rolling, steep, mixed)	Flat		
	b)	Describe the nature of the vegetation & water on the land (brush, shrubs, tree s		eeks,	etc.)
		Open land currently being farm	red.		
-	14/4	V			
5.		TER SERVICES:			
	a)	Existing Source of Water: None			
	b)	Proposed water source (if not rezoning parcel in its entirety).  ☐ Proposed water supply to new lots by a licensed (surface)water distribution ☐ Proposed water supply to new lots by cistern and hauling;	system;		
		Proposed water supply to new lots by individual water wells.			

6.	SEI	WER SERVICES:				÷.
	a)	Existing sewage disposal:	None	9		
	b)	Proposed sewage disposal:	Field	System.	4	
				V		

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

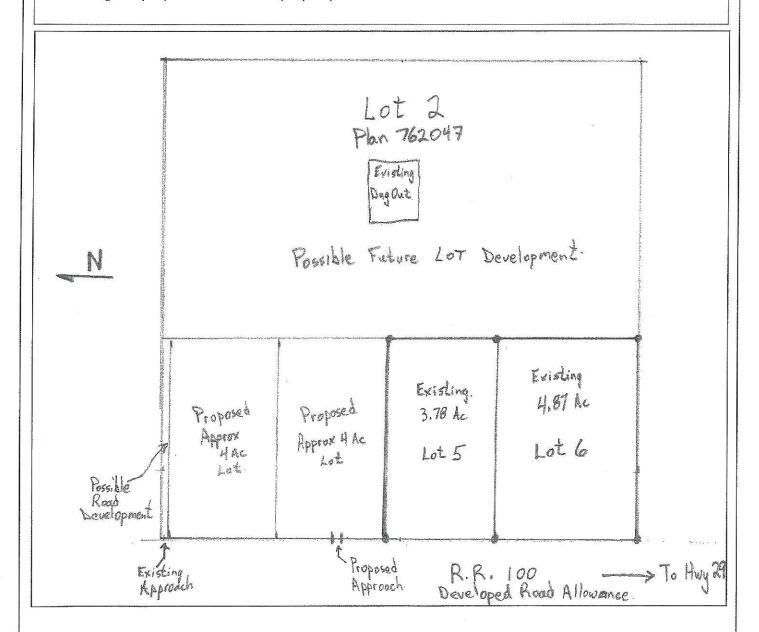
The personal information provided will be used to process the Rezoning Application is collected under the authority of Section 642 of the Municipal Government Act. Personal information you provide may be made public pursuant to the provisions of the Freedom of Information and Protection of Privacy (FOIP) 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.

REGISTERED OWNER OR PERSON ACTING OF	N BEHALF:					
I, MICHAEL & JENNIFER MACHURA hereby certify that (check one):						
☑ I am the registered owner; or						
☐ I am authorized to act on behalf of the registered owner						
and that the information given on this form is statement of the facts relating to this applica-		pest of my knowledge, a true				
Agent Signature	-	Date				
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Owner Signature	÷	DEC 18/16 Date				
		500 pc				
Øwner Signature	-	DEC 13/16 Date				
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		w.				
	5					

Lot 02 Block	Plan	7620647	and/or	Part of SW 1/4 Sec 7	Twp 58 Rge 9 W4M
LOT DIOCK		7000	41147.01	1 411 01 25 1 74 500	_ / WP / MBC / WIN

## Proposed Sketch - please indicate/include:

- The use, location and dimensions of buildings on the land and specify which buildings may be demolished or moved from property.
- Location of any water bodies on subject property.
- All developed and undeveloped road allowances.
- Indicate the North direction.
- Location of all right-of-way and easements within or abutting the subject property.
- Location of existing wells/ septic systems and distances from property lines to any permanent structures.
- Indicate the location, dimensions and boundaries of the land to be rezoned.
- Location of all right-of-way and easements within or abutting the subject property.
- · Existing and proposed accesses on property.



Date:	Signature of Applicant:	

## General Location Map

