



# COUNTY OF NORTHERN LIGHTS

## Information Needed to Submit a Subdivision Application

### 1. COMPLETE AND SIGN THE APPLICATION

2. **SUBMIT THE APPROPRIATE FEES:** \$100 Application Fee  
\$100 is also required for each lot created, including the balance of the parcel

(For Example: \$300.00 is required for a Farmstead Application)

### 3. PROVIDE AN UP-TO-DATE COPY OF TITLE

(A copy of your title should be obtained that is not more than two (2) months prior to the date of your application. Titles are available from your local/regional Licence & Registry Office. Please note the following: **You may or may not be charged a fee for this service.**)

### 4. SKETCH SHOWING THE PROPOSED SUBDIVISION

Rural areas, please use the attached sketch form. Please be sure to show the size of the area being subdivided. Also, please indicate the approximate location of the sewage system, the water supply system, any buildings, treed areas and water courses. As well, please provide the measured distances between all buildings, and the sewage disposal system, the water system and the proposed property lines.

Urban areas and Hamlet areas, please attach a "Real Property Report", if buildings are on the proposed subdivision site. These reports are prepared by surveyors.

### 5. RURAL APPLICATIONS

Please complete:

- A. The form indicating the water supply system and sewage disposal system, and have an up-to-date Aerial Photograph attached to your application.

Aerial photographs are available from:

Air Photo Distribution Center  
9920-108 Street- Main Floor  
Edmonton, Alberta  
T5K 2M4  
Telephone: (780) 427-3520  
Fax: (780) 422-9683  
E-mail: air.photo@gov.ab.ca  
(A fee will be charged)

### 6. COMPLETE RIGHT-OF-ENTRY FORM

### 7. COMPLETE SKETCH DISCLAIMER FORM

**Please bring or mail the above information to:**  
**County of Northern Lights**  
# 600, 7<sup>th</sup> Ave. NW, Box 10  
Manning, AB T0H 2M0



# SUBDIVISION APPLICATION FORM

“An Agriculture Based Community”

FOR ADMINISTRATIVE USE

APPLICATION NO.

DATE RECEIVED

ROLL NO.

County of Northern Lights, # 600, 7<sup>th</sup> Ave. NW Box 10, Manning, AB, T0H 2M0

W: [www.countyofnorthernlights.com](http://www.countyofnorthernlights.com) | E: [info@countyofnorthernlights.com](mailto:info@countyofnorthernlights.com) | T: (780) 836-3348 | F: (780) 836-3663

This form is to be completed in full wherever applicable by the registered land owner that is the subject of the application or by a person authorized to act on the registered owner's behalf.

APPLICANT INFORMATION	COMPLETE IF DIFFERENT FROM APPLICANT
NAME OF APPLICANT	NAME OF REGISTERED OWNER
ADDRESS	ADDRESS
POSTAL CODE	POSTAL CODE
EMAIL ADDRESS*	EMAIL ADDRESS*
<b>*By supplying the County with an email address, you agree to receive correspondence by email.</b>	
PHONE (CELL)	PHONE (CELL)
PHONE (RES)	PHONE (RES)
PHONE (BUS)	PHONE (BUS)

LEGAL DESCRIPTION AND AREA OF LAND TO BE SUBDIVIDED
Legal description of parcel to be subdivided: Registered Plan: _____ Block: _____ Lot (parcel): _____
QTR/LS: _____ Section: _____ Township: _____ Range: _____ Meridian: _____
Area of the Parcel to be subdivided: _____ Hectares: _____ or Acres: _____

LOCATION OF LAND TO BE SUBDIVIDED
(a) Is the land situated immediately adjacent to a municipal border? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", the adjoining municipality is: _____
(b) Is the land situated within 1.6 kilometres of a right-of-way of a highway? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", which highway: _____
(c) Is the land situated in the Grimshaw Gravels Aquifer? <input type="checkbox"/> Yes <input type="checkbox"/> No
(d) Does the proposed parcel contain or is it adjacent to a body of water, lake, river, creek, wetland, or by a drainage ditch or canal? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", state the name or describe it: _____ _____
(e) Is the land situated within a hamlet? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", which hamlet: _____
(f) Is the parcel within 1.5 kilometres of a sour gas facility? <input type="checkbox"/> Yes, Distance: _____ <input type="checkbox"/> No
(g) Is the parcel within 800 metres (0.5 miles) of a Confined Feeding Operation? <input type="checkbox"/> Yes, Distance: _____ <input type="checkbox"/> No
(h) Is the parcel within 450 metres of a sewage treatment plant/lagoon? <input type="checkbox"/> Yes, Distance: _____ <input type="checkbox"/> No

**EXISTING AND PROPOSED USE OF LAND TO BE SUBDIVIDED**

Describe:

- (a) Existing use of the land: \_\_\_\_\_
- (b) Proposed use of the land: \_\_\_\_\_
- (c) The land use district ("zoning") classified under the Land Use Bylaw: \_\_\_\_\_
- (d) Is a redistricting ("rezoning") required?    Yes    No
- (e) How many lots within the parcel will result after the subdivision (including existing lots): \_\_\_\_\_
- (f) Access to the subdivided lots will be from: \_\_\_\_\_
- (g) How many **existing** dwelling units are there: \_\_\_\_\_

**PHYSICAL CHARACTERISTICS OF THE LAND TO BE SUBDIVIDED (WHERE APPROPRIATE)**

- (a) Describe the nature of the topography of the land (flat, rolling, steep, mixed): \_\_\_\_\_
- (b) Describe the nature of the vegetation and water on the land (brush, shrubs, tree stands, woodlots, etc., – sloughs, creeks, etc.):  
\_\_\_\_\_
- (c) Describe the kind of soil on the land (sandy, loam, clay etc.): \_\_\_\_\_  
\_\_\_\_\_

**EXISTING BUILDINGS ON THE LAND TO BE SUBDIVIDED**

Describe any buildings and any structures on the land and whether they are to be demolished or moved:

**REQUIRED INFORMATION**

- SITE PLAN /  REAL PROPERTY REPORT     FEES     LAND TITLE     ABANDONED OIL WELL DECLARATION
- BYLAW AMENDMENT FORM     AERIAL IMAGES     RIGHT OF ENTRY FORM     SKETCH DISCLAIMER FORM
- WATER SUPPLY/SEWAGE DISPOSAL DESCRIPTION FORM

**REGISTERED LANDOWNER OR PERSON ACTING ON THE REGISTERED OWNER'S BEHALF**

I/We, \_\_\_\_\_, hereby certify that:

- I/We am the registered landowner or;
- I/We am the agent authorized to act on behalf of the registered landowner;

and that the information given on this form is full and complete and is, to the best of my knowledge, a true statement of the facts relating to this application;

- I/We acknowledge that as a condition of subdivision, the County may require that ten percent (10%) of the developable lands be dedicated as **municipal reserve** as provided for under the Act;
- I/We acknowledge that as a condition of subdivision, the County shall require the protection and conservation of hazard lands, crown owned resources, and environmentally sensitive areas by dedication of **environmental reserve** and **municipal reserve**, the provision of environmental reserve easements and conservation easements, or by other statutory means as defined by the Municipal Government Act, or the Alberta Land Stewardship Act.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**SIGNED COPY OF AGENT AUTHORIZATION MUST BE ATTACHED TO THIS FORM, IF APPLICABLE.**

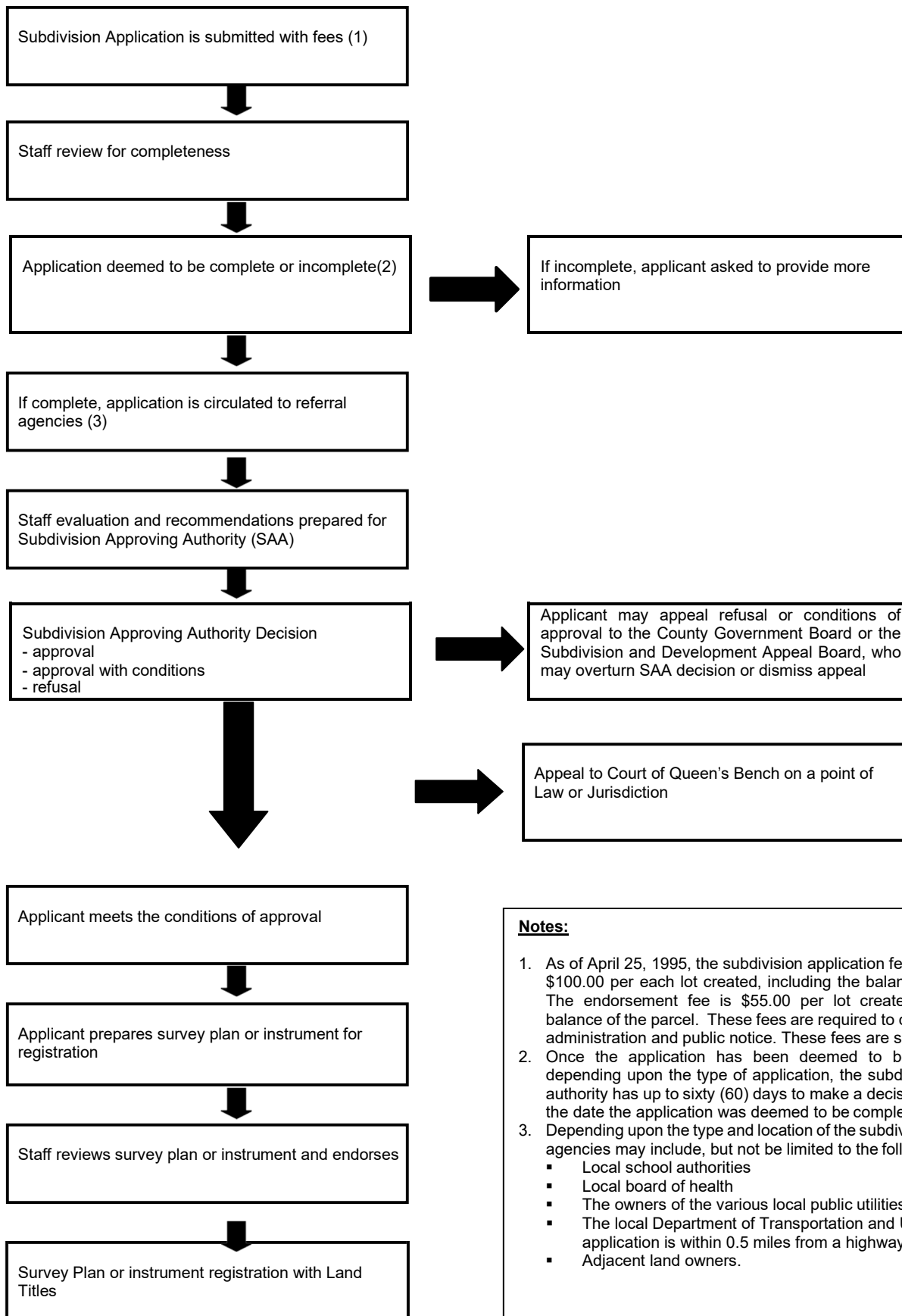
**FOR ADMINISTRATIVE USE**

LAND USE DISTRICT: \_\_\_\_\_

NUMBER OF LOTS PROPOSED INCLUDING THE BALANCE: \_\_\_\_\_

FEE ENCLOSED:    YES  NO     AMOUNT: \$ \_\_\_\_\_    RECEIPT NO.: \_\_\_\_\_

# County of Northern Lights Subdivision Process Steps



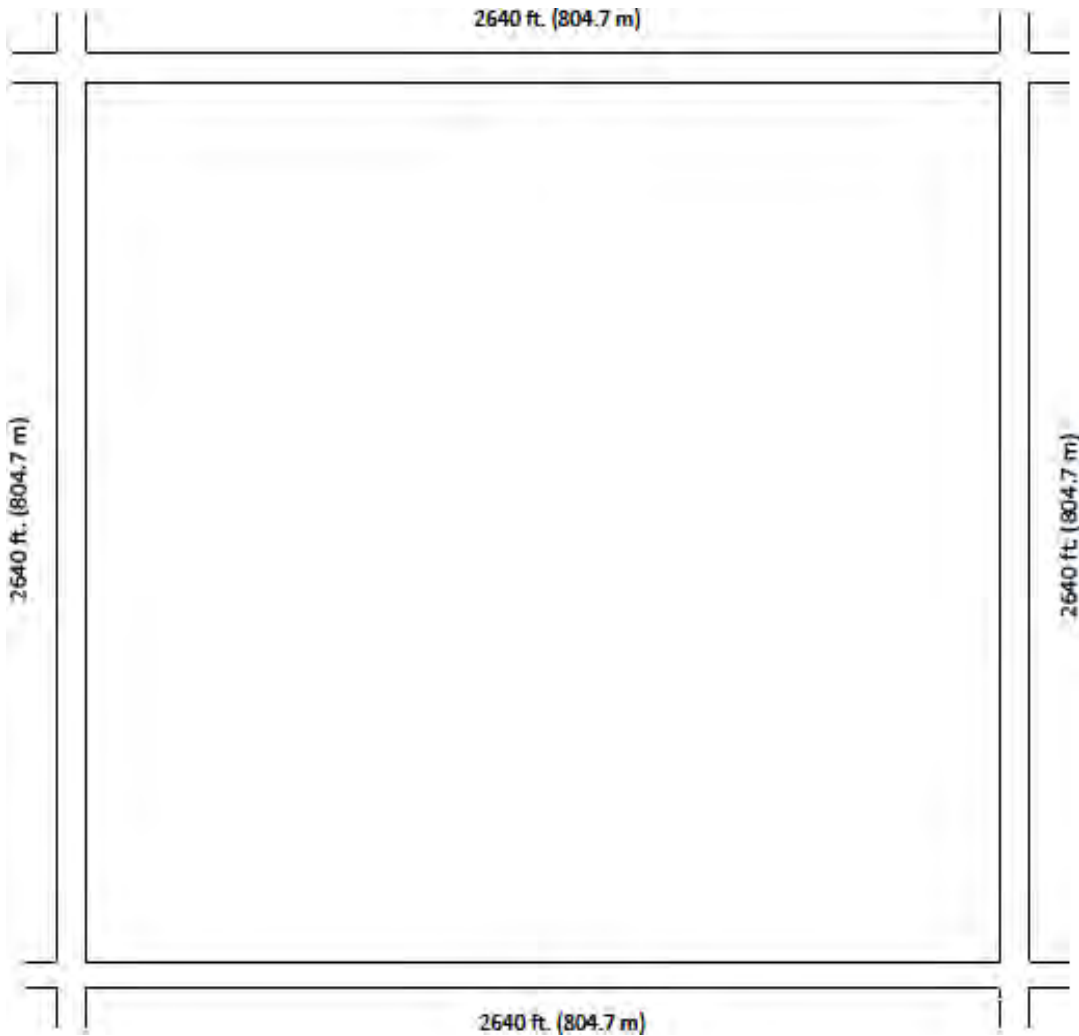
- Notes:**
1. As of April 25, 1995, the subdivision application fee is \$100.00 plus \$100.00 per each lot created, including the balance of the parcel. The endorsement fee is \$55.00 per lot created, including the balance of the parcel. These fees are required to cover the costs of administration and public notice. These fees are subject to change.
  2. Once the application has been deemed to be complete and depending upon the type of application, the subdivision approving authority has up to sixty (60) days to make a decision, starting from the date the application was deemed to be complete.
  3. Depending upon the type and location of the subdivision, the referral agencies may include, but not be limited to the following:
    - Local school authorities
    - Local board of health
    - The owners of the various local public utilities
    - The local Department of Transportation and Utilities, if the application is within 0.5 miles from a highway right of way
    - Adjacent land owners.

# PROPOSED SUBDIVISION SKETCH

LEGAL \_\_\_\_\_ ¼ SEC \_\_\_\_\_ TWP \_\_\_\_\_ RG \_\_\_\_\_ W \_\_\_\_\_ M

- ┌ Locate proposed parcel in ¼ section.
- ┌ Parcel Boundaries/dimensions (feet, metres, etc.).
- ┌ Locate developed road allowance(s) and access points(s).
- ┌ Distance from all proposed boundary lines to all non-movable buildings (if applicable).
- ┌ Distance from residence to drinking water supply, sewage system outlet and all proposed boundary lines (if applicable).
- ┌ Distance from sewage outlet to water supply and all boundary lines (if applicable).
- ┌ Distance from water supply to all proposed boundary lines (If applicable).
- ┌ Locate additional residence(s) on the ¼ section (if applicable).
- ┌ Locate shelterbelts, creeks, rivers, drainage ditches, railways, etc.

North



PROPOSED PLAN OF SUBDIVISION COUNTY OF NORTHERN LIGHTS

\_\_\_\_\_ SEC \_\_\_\_\_ TWP \_\_\_\_\_ RG \_\_\_\_\_ W \_\_\_\_\_ M

FILE NO. \_\_\_\_\_ PROPOSED SUBDIVISION \_\_\_\_\_

# County of Northern Lights

# 600 7th Avenue NW, Box 10, Manning, AB T0H 2M0

Phone: (780) 836-3348 Fax (780) 836-3663

**RIGHT OF ENTRY BY AN AUTHORIZED PERSON FROM THE COUNTY OF NORTHERN LIGHTS FOR THE PURPOSES OF A SITE INSPECTION OF THE LAND AFFECTED BY A PROPOSED SUBDIVISION APPLICATION.**

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The County Government Act, 1995, Section 542 (1) states the following:

A designated officer of the county may “enter such land or structure at any reasonable time, and carry out the inspection, enforcement or action authorized or required by the enactment or bylaw,”

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**IN ACCORDANCE WITH SECTION 542 (1) a OF THE COUNTY GOVERNMENT ACT, PLEASE COMPLETE THE FOLLOWING RIGHT OF ENTRY FORM AND SUBMIT WITH YOUR SUBDIVISION APPLICATION.**

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I do \_\_\_ or do not \_\_\_ give consent for an authorized person of the County of Northern Lights to enter the land subject to a subdivision application for the purpose of making a site inspection in order to evaluate the proposed subdivision application.

LEGAL DESCRIPTION OF THE LAND \_\_\_\_\_

NAME (Please Print) \_\_\_\_\_

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

\*\*\*\*\***RIGHT OF ENTRY**\*\*\*\*\*

# County of Northern Lights

# 600 7th Avenue NW, Box 10, Manning, AB T0H 2M0

Phone: (780) 836-3348 Fax (780) 836-3663

Date: \_\_\_\_\_

THE OWNER(S) HEREBY ACKNOWLEDGES THAT THIS SKETCH IS FOR THE PURPOSES OF PROCESSING A SUBDIVISION APPLICATION ONLY.

THIS SUBDIVISION SKETCH IS PREPARED WITH INFORMATION PROVIDED BY THE OWNER(S). ACCORDINGLY, THE COUNTY OF NORTHERN LIGHTS IS NOT RESPONSIBLE FOR THE ACCURACY OF THE SKETCH OR ANY OTHER INFORMATION CONTAINED HEREIN.

\_\_\_\_\_  
(Applicant)

\_\_\_\_\_  
(Owner/Leaseholder)

\_\_\_\_\_  
(Owner/Leaseholder)

\*\*\*\*\*DISCLAIMER\*\*\*\*\*

# **RURAL SUBDIVISIONS**

## **ADDITIONAL INFORMATION REQUIRED**

PLEASE NOTE BELOW THE TYPE OF WATER SUPPLY AND SEWAGE DISPOSAL THAT IS EITHER EXISTING OR PROPOSED FOR THE LOTS INDICATED ON THE SKETCH ACCOMPANYING YOUR APPLICATION. (THE LOCATION OF THESE FACILITIES MUST BE ACCURATELY INDICATED ON THE SKETCH.)

<b>TYPE OF WATER SUPPLY</b>	<b>1<sup>ST</sup> Parcel</b>	<b>2<sup>nd</sup> Parcel</b>	<b>Balance of the ¼</b>
DUGOUT			
WELL			
CISTERN & HAULING			
COUNTY SERVICE			
OTHER (Please specify)			

<b>TYPE OF SEWAGE DISPOSAL</b>	<b>1<sup>st</sup> Parcel</b>	<b>2<sup>nd</sup> Parcel</b>	<b>Balance of the ¼</b>
OPEN DISCHARGE/PUMPOUT (#257)			
SEPTIC TANK/HOLDING TANK (#254)			
TILEFIELD/EVAPORATION MOUND (#256)			
SEWAGE LAGOON (#258)			
COUNTY SERVICE			
OTHER (Please specify [i.e. cesspools] (#255))			

PLEASE INDICATE IF THE ABOVE EXISTS OR PROPOSED BY ENTERING AN E OR P IN THE APPROPRIATE COLUMN. (If unsure, please check with the local Health Unit or the Plumbing Inspection Branch).





## APPLICANT STATEMENT REGARDING ABANDONED WELLS

In accordance with the Municipal Government Act Subdivision and Development Regulation

I, \_\_\_\_\_, registered owner (or  
(Please Print)

their agent) of \_\_\_\_\_, have consulted the Energy  
(Legal Land Description)

Resources Conservation Board (ERCB) Abandoned Well Map Viewer, and verified that **there are no abandoned wells** located the property subject to this application. A copy of the ERCB map showing the subject property is attached.

\_\_\_\_\_  
Signature of registered owner (or agent)

\_\_\_\_\_  
Date



## APPLICANT STATEMENT REGARDING ABANDONED WELLS

In accordance with the Municipal Government Act Subdivision and Development Regulation

I, \_\_\_\_\_, registered owner (or  
(Please Print)

their agent) of \_\_\_\_\_, have consulted the Energy  
(Legal Land Description)

Resources Conservation Board (ERCB) Abandoned Well Map Viewer, and verified that **abandoned wells are located on the property** subject to this application. I have contacted the responsible licensee(s), and the exact well location(s) has/have been confirmed.

Additional information provided by the licensee(s) requiring a change in the setback area is attached:

- Yes
- Not applicable

In the event that construction activity occurs within the setback area of the abandoned well(s) as a result of development on the subject property, the abandoned well(s) will be temporarily marked with on-site identification to prevent contact during construction.

A copy of the ERCB map showing the subject property and a list identifying and locating the abandoned well(s) on the subject property are attached.

\_\_\_\_\_  
Signature of registered owner (or agent)

\_\_\_\_\_  
Date

**NOTICE**  
**Compliance Monitoring**  
**Agencies Authorized by the Albert Safety Codes Authority to Issue Permits and Provide Compliance Monitoring**  
**in Non-Accredited Municipalities**

<b>Agency Name</b>	<b>Phone</b>	<b>Fax</b>	<b>Building Permits</b>	<b>Electrical Permits</b>	<b>Gas Permits</b>	<b>Plumbing Permits</b>
Canadian Safety Consulting	(780) 897-1998 1-877-780-7233	(780) 539-7185 1-888-780-7232	Yes	No	No	No
Superior Safety Codes Inc. (Edmonton)	(780) 489-4777 1-866-999-4777	(780) 489-4711 1-866-900-4711	Yes	Yes	Yes	Yes
The Inspections Group Inc.	(780) 454-5048 1-866-554-5048	(780) 454-5222 1-866-454-5222	Yes	Yes	Yes	Yes

**ALBERTA PRIVATE SEWAGE SYSTEMS STANDARDS (2015)**

*Clearance Requirements in METERS (Official measurements in metric)*

<b>Distance From/To</b>	<b>Property Line</b>	<b>Water Source or Water Well</b>	<b>Municipal Water Well</b>	<b>Water Course * Article 2.1.2.4</b>	<b>** Building</b>	<b>Building with Basement, Cellar or Crawl Space</b>	<b>Building without Basement, Cellar or Crawl Space</b>	<b>Building with permanent foundation without basement, cellar or crawl space</b>	<b>Building without permanent foundation</b>	<b>Septic Tanks and/or Packaged Sewage Treatment Plants</b>
<b>Holding Tanks</b>	1 m (3.25 ft)	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)	-	-	-	-	-
<b>Septic Tanks</b>	1 m (3.25 ft)	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)	-	-	-	-	-
<b>Packaged Sewage Treatment Plants</b>	Refer to 2015 SOP 5.2.2	-	-	-	-	-	-	-	-	-
<b>Sand Filters</b>	1 m (3.25 ft) from foot of berm	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)	-	-	-	-	-
<b>Gravel Filters</b>	3 m (10 ft) from foot of berm	10 m (33 ft)	-	10 m (33 ft)	Refer to 2015 SOP 5.4.2.1.1(d) and 5.4.2.1.2	-	-	-	-	-
<b>Effluent Tanks</b>	1 m (3.25 ft)	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)	-	-	-	-	-
<b>Settling Tanks</b>	Refer to 2015 SOP 6.2.2. (1),(2),(3), and (4)	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)	-	-	-	-	-
<b>Lift Stations</b> Refer to 2015 SOP 6.3.2.1.2	1 m (3.25 ft)	10 m (33 ft)	-	10 m (33 ft)	1 m (3.25 ft)					
<b>Treatment Fields</b>	1.5 m (5 ft)	15 m (50 ft)	100 m (330 ft)	* 15 m (50 ft)	-	10 m (33 ft)	-	5 m (17 ft)	1 m (3.25 ft)	5 m (17 ft) Refer to 2015 SOP8.2.2.1.1(h)
<b>Treatment Mounds</b>	3 m (10 ft)	15 m (50 ft)	100 m (330 ft)	* 15 m (50 ft)	-	10 m (33 ft)	10 m (33 ft)	-		3 m (10 ft) Refer to 2015 SOP8.4.2.1(e)
<b>Drip Dispersal and Irrigation</b>	1.5 m (5 ft)	15 m (50 ft)	100 m (330 ft)	* 15 m (50 ft)	-	Refer to 2015 SOP 8.5.2.1(e)	-	Refer to 2015 SOP 8.5.2.1(g)	1 m (3.25 ft)	Refer to 2015 SOP 8.5.2.1(h)
<b>LFH At-grade Treatment Systems</b>	Refer to 2015 SOP 8.6.2.1.1(d) and 8.6.2.1.1(e)	15 m (50 ft)	100 m (330 ft)	* 15 m (50 ft)	10 m (33 ft)	-	-	-	-	Refer to 2015 SOP 8.6.2.1.1(f)
<b>Open Discharge Systems</b>	90 m (300 ft)	50 m (165 ft)	100 m (330 ft)	* 45 m (150 ft)	45 m (150 ft)	-	-	-	-	-

<i>Distance From/To</i>	<i>Property Line</i>	<i>Water Source or Water Well</i>	<i>Municipal Water Well</i>	<i>Water Course * Article 2.1.2.4</i>	<i>** Building</i>	<i>Building with Basement, Cellar or Crawl Space</i>	<i>Building without Basement, Cellar or Crawl Space</i>	<i>Building with permanent foundation without basement, cellar or crawl space</i>	<i>Building without permanent foundation</i>	<i>Septic Tanks and/or Packaged Sewage Treatment Plants</i>
<i>Lagoon serving a single family dwelling or duplex</i>	30 m (100 ft)	100 m (330 ft)	100 m (330 ft)	90 m (300 ft)	45 m (150 ft)	-	-	-	-	-
<i>Lagoon serving other than a single family dwelling or duplex</i>	30 m (100 ft) 90 m (300 ft) from a numbered primary or secondary road	100 m (330 ft)	-	90 m (300 ft)	90 m (300 ft)	-	-	-	-	-
<i>Privies-Earthen</i>	5 m (17 ft)	15 m (50 ft)	-	* 15 m (50 ft)	Refer to 2015 SOP 10.1.2.1	-	-	-	-	-
<i>Privies-Tank</i>	Refer to 2015 SOP 10.1.2.1	10 m (33 ft)	-	10 m (33 ft)	Refer to 2015 SOP 10.1.2.1	-	-	-	-	-

Please reference the Alberta Private Sewage Systems Standard of Practice 2015 for complete design, installation, and material requirements. For more information contact your local Authorized Agencies or Safety Services via telephone at 1-866-421-6969; or via e-mail at [safety.services@gov.ab.ca](mailto:safety.services@gov.ab.ca)

**\* Article 2.1.2.4 Separation from Specific Surface Waters**

- 1) The soil-based treatment component of an on-site wastewater treatment system shall be located not less than 90 m (300 ft.) from the shore of a lake, river, stream, or creek.
- 2) Notwithstanding the requirements of Sentence (1), where a principal building or other development feature is situated between the soil-based treatment component and a lake, river, stream, or creek, such that a failure of the system causing effluent on the ground surface will be obvious and create an undesirable impact own the owner, the distance may be reduced to the minimum distance requirements set out in this Standard for the particular type of treatment system being used.

**\*\* Building** means any structure used or intended for supporting or sheltering any use or occupancy that is subject to the Alberta Building Code requirements.

**NOTICE TO RESIDENTS WHO LIVE WITHIN THE GRIMSHAW GRAVELS AQUIFER**

The Grimshaw Gravels Aquifer Management Advisory Association is inviting residents who live within the Grimshaw Gravels Aquifer, and have private working wells, to participate in an ongoing water quality monitoring program. Participants are requested to test your water well up to twice per year and forward the data sheet, along with your well depth, to the M.D. of Peace No. 135 office in Berwyn. The purpose of this program is to ensure the long-term health of our Aquifer. Testing bottles can be picked up at the Public Health Office in Peace River or Fairview. If you require more information please contact M.D. of Peace office at 780-338-3845 or email [mdpeace@wispernet.ca](mailto:mdpeace@wispernet.ca).