



MUNICIPAL ADDRESS CHANGE APPLICATION FORM

Planning Services ■ Town of Okotoks, Box 20 (5 Elizabeth St.), Okotoks AB, T1S 1K1 ■ planning@okotoks.ca ■ Phone: 403.995.2760 ■ Fax: 403.938.7387

Applicant Name: _____ Company: _____
(if applicable)

Applicant Mailing Address: _____
(including Postal Code)

Phone #: _____ Fax #: _____ Email: _____
If a response has not been received within five (5) business days, please check your Junk (Spam) folder

Current Civic Address: _____

Proposed Civic Address: _____

Legal Description: _____
 Lot(s) Block Plan Quarter Section

Reason for Request: _____

Signature of Applicant _____ Date _____

The personal information on this application is collected under the authority of the Alberta Municipal Government Act, the Freedom of Information and Protection of Privacy Act (FOIP), and the Okotoks Land Use Bylaw 40-98. It will be used to communicate with the applicant during the application review and site inspection processes. As part of the review process, it will be circulated as needed to relevant Town Business Services, Provincial and Federal Agencies, Utility Companies and adjacent landowners. It may also be submitted to the Okotoks Municipal Planning Commission (MPC) and/or the Subdivision and Development Appeal Board (SDAB). Correspondence received may be included in public meeting agendas. The applicant's name and the nature of the permit will be publicly available, in accordance with the FOIP Act. Should you have any questions or concerns regarding the collection of this information, please contact the FOIP Coordinator at foip@okotoks.ca or 403.995.2774.

For Office Use Only		
File #: _____	Fee: _____	Receipt # _____

MUNICIPAL ADDRESS CHANGE REQUIREMENT CHECKLIST

The following information is necessary to facilitate a thorough evaluation and timely decision on your application. Please ensure all materials submitted are clear, legible, and precise. Please include this information when submitting your application.

Completed by Applicant	Office Use Only	Required Items
<input type="checkbox"/>	<input type="checkbox"/>	Completed Application Form.
<input type="checkbox"/>	<input type="checkbox"/>	Fee prescribed in fee schedule.
<input type="checkbox"/>	<input type="checkbox"/>	A Letter of Authorization from the registered owner of the property, if the applicant is not the owner.
<input type="checkbox"/>	<input type="checkbox"/>	If the change involves a multi-unit building or multi-building site, a site / building plan showing the individual building units (preferably without dimensions). The plan can be submitted electronically in .pdf format or hard copy.

Please Note:

- The applicant will receive written notification when an official address change has been made.
- An official address change is required any time a change of an existing address is desired.
- Changes to municipal addresses are subject to the requirements of the Town of Okotoks Policy on Assigning or Revising Addresses for Parcels and Structures.
- Please allow a minimum of five business days for a change of municipal address to be processed and assigned.
- Additional information may be required from the applicant after Planning Services has reviewed the submission.
- An application is considered complete when all required materials are received and the fee is processed.