



SMALL UTILITY SERVICE APPLICATION

Regional District of North Okanagan

TYPE OF APPLICATION	
<input type="checkbox"/> Grindrod <input type="checkbox"/> Whitevale <input type="checkbox"/> Gunter Ellison <input type="checkbox"/> Silver Star <input type="checkbox"/> Mabel Lake Water <div style="text-align: right;"><input type="checkbox"/> Mabel Lake Sewer</div>	
<input type="checkbox"/> Water Service Application Fee (\$125.00 flat fee)	<input type="checkbox"/> Building Plan Review (\$150.00 + \$10.00 Per Domestic Unit or equivalent)
<input type="checkbox"/> Subdivision Application Fee (\$300.00 + \$10.00 per lot)	<input type="checkbox"/> Hydraulic Modeling (\$200.00 Per Modeling Result)
<input type="checkbox"/> Other	
<i>Above fees are per the Regional District of North Okanagan Small Utilities Rates Imposition Amendment Bylaw and the Silver Star water Fees Imposition Amendment Bylaw, as amended</i>	
NOTE: Where the applicant is NOT the REGISTERED OWNER(S), the Application must be signed by the REGISTERED OWNER(S) , or his/her AUTHORIZED AGENT (use a separate sheet if necessary)	
PROPERTY DESCRIPTION	
Legal Description:	
Civic Address:	
APPLICANT INFORMATION	
Utility Application Primary Contact:	Registered Owner(s) of the Property:
Full Legal Name:	Full Legal Name:
Corporate Owner (if applicable):	Corporate Owner (if applicable):
Mailing Address:	Mailing Address:
Primary Contact No.:	Primary Contact No.:
Cell:	Cell:
Email/Fax:	Email/Fax:

UTILITY SERVICE PROPOSAL INFORMATION	
Briefly describe your proposal:	
COORDINATING PROFESSIONALS	
<i>List any professionals known to date (e.g. Architect, Surveyor, Engineer, etc.)</i>	
Name:	Name:
Title:	Title:
Address:	Address:
Primary Contact No.:	Primary Contact No.:
Cell:	Cell:
Email/Fax:	Email/Fax:
OWNER / APPLICANT CONFIRMATION	
<ol style="list-style-type: none"> As applicant or approved agent, I confirm that I have read all relevant Regional District of North Okanagan Bylaws and policies and that this application is in conformance (unless a Bylaw amendment forms part of this application). I accept responsibility for processing delays caused by incorrect or insufficient submission materials. I understand that this application form is a public document and that any and all information contained within the application, including personal information as that term is defined in the <i>Freedom of Information and Protection of Privacy Act of B.C.</i> is open for inspection by the public and may be reproduced and distributed to the public as part of a report(s) to the Board of Directors or for purposes of a public hearing. 	
Signature of Owner:	Date:
Signature of Applicant:	Date:
OFFICE USE ONLY	
File Number:	Fees Submitted: \$
Received By:	Receipt #:
Date:	

Updated: March 3, 2017