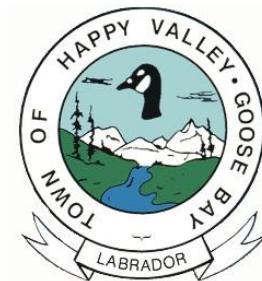


Subdivision Application Form

Town of Happy Valley-Goose Bay
P.O. Box 40 Stn. B
Happy Valley-Goose Bay
A0P 1E0
Phone 896-3321
Fax 896-9454



PROPERTY LOCATION INFORMATION

Civic #; _____ Street Name; _____ Date; _____

CONTACT INFORMATION

Applicant

Applicant; _____
Mailing Address; _____

Phone; Home; _____
Work; _____
Cell; _____
Email; _____

Property Owner (If same as applicant ☐)

Owner; _____
Mailing Address; _____

Phone; Home; _____
Work; _____
Cell; _____
Email; _____

SURVEYOR

Company; _____
Mailing Address; _____

Phone; Work; _____
Cell; _____
Email; _____

LAND INFORMATION

Located on an existing Town street? Yes ☐ No ☐

Town water available? Yes ☐ No ☐

Town sewer available? Yes ☐ No ☐

Zoning; _____

Number of lots created; _____

DESCRIPTION OF WORK

Applicant Signature _____

Property Owner Signature
(If not the same as applicant) _____