

Please send completed request and supporting materials to peggys.cove.commission@novascotia.ca

Contact Information

| | |
|----------------------------|---|
| Applicant Name: | Property Owner Name(s): (if different from left) |
| Applicant Phone Number: | Applicant Email: |
| Applicant Mailing Address: | |

Property Details

| | | | | | | | |
|-----------------------|-----------|------------|----------------------|-------------------|--------|--------------|-------|
| Address: | | | | | | | |
| Primary PID Number: | | | Other Affected PIDs: | | | | |
| Water Service: | Well | Cistern | Other | Sanitary Service: | Septic | Holding Tank | Other |
| Heritage Designation: | Municipal | Provincial | Federal | | | | |

Amendment Request

I am requesting an amendment to the Zoning Map with the following details:

| | | | | | |
|------------------|-------------|------|------------------------|------------------|--------------|
| Current Zoning: | Residential | Core | Service and Facilities | Fishing Industry | Conservation |
| Proposed Zoning: | Residential | Core | Service and Facilities | Fishing Industry | Conservation |

I am requesting an amendment to the text of the Land Use Bylaw with the following details:



● Development Details and Amendment Rationale

Please describe the development that would be enabled by the proposed amendment, and the rationale for the amendment. Attach additional sheets as necessary, along with any supporting information (site plans, elevation drawings, etc.)

● Signature and Date

I hereby submit this request and confirm that the information provided is correct. I understand that my request will be made public. I agree to provide any additional information requested and to pay all applicable fees. I understand that a successful request does not constitute development approval and I will not commence development without obtaining a development permit from the Peggy's Cove Commission.

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|---|
| Applicant Signature: |
| Property Owner Signature (if different than applicant): |
| Date: |

Office Use Only

| | |
|------------------------|-----------|
| Date Request Received: | File No.: |
|------------------------|-----------|