



Application Form for Development Permit from NV (for companies)

(Project proponent = Company)

Northern Village of:

Areas in grey reserved for NV - do not fill out.

Application number: _____ Date: _____
(APC-village code / year / application#)

Applicant: _____

Address: _____

Telephone: | | | | | - | | | | |

1. PROJECT DESCRIPTION:

Nature of development:

☐

Residential

☐

Public and institutional

☐

Commercial

☐

Industrial

☐

Civil engineering

☐

Renovation (existing building)

Specify: _____

Location of project if known (lot #, building #, etc.): _____

Number of buildings (principal and accessory): _____

Size of building (area): _____ m x _____ m / _____ ft x _____ ft

Height of building (# of stories, not including basement): _____

Type of building foundation (piles/piles anchored on bedrock/tripods/columns/concrete/etc.): _____

Size of lot required: _____

Minimum size of lot required: _____
(minimum distances and area)

Municipal services required:

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Water (aqueduct where applicable) | <input type="checkbox"/> Sewage |
| <input type="checkbox"/> Garbage collection | <input type="checkbox"/> Telephone |
| <input type="checkbox"/> Electricity | |

Other (*specify*): _____

Access to main road:

- ☐ Existing
- ☐ To be built (include in site plan of project)

Zoning of requested lot:

- | | |
|---|--|
| <input type="checkbox"/> Residential: | Ra_____ Rb_____ |
| <input type="checkbox"/> Public and institutional | |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Special use | <input type="checkbox"/> Airport and communication |
| <input type="checkbox"/> Beaching and unloading | <input type="checkbox"/> Conservation |
| <input type="checkbox"/> Hinterland | <input type="checkbox"/> Future development area |

Size of lot required: _____

2. SURROUNDING AREA:

Height of surrounding buildings (number of stories): _____

Zoning of surrounding area: _____

3. ESTIMATED COST OF PROJECT (SPECIFY WITH OR WITHOUT TAXES): _____

4. ESTIMATED DATES OF COMMENCEMENT AND COMPLETION OF CONSTRUCTION:

_____ to _____
(year / month / day) (year / month / day)

5. NAME AND ADDRESS OF PROFESSIONALS *(if applicable):*

Architect and/or Engineer: _____

Address: _____

Telephone: [][][][] [][][][]-[][][][][] Fax: [][][][] [][][][]-[][][][][]

Email: _____

6. NAME AND ADDRESS OF BUILDING CONTRACTOR *(if applicable):*

Name: _____

Address: _____

Telephone: [][][][] [][][][]-[][][][][] Fax: [][][][] [][][][]-[][][][][]

Email: _____

(Please note, a list of the construction equipment may be required from the building contractor by the NV before beginning work.)

7. ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF APPLICATION *(reasons for project and location):*

8. REQUIRED DOCUMENTS TO SUBMIT WITH THE APPLICATION:

A. Location plan (scale 1 : 1000 or 1 : 2000) showing the following elements:

- physical constraints
- existing and proposed road network
- required lot size

B. Site plan (scale 1 : 250 or 1 : 500) showing the following elements:

- building area and dimensions (number of stories)
- location of main building and accessory buildings
- dimension of side, front and back yards according to the dimensions of the lot
- adjacent existing and proposed road network

C. A cheque made out to The Northern Village of _____ in the amount of \$ _____

Application and accompanying plans (site and location) must be forwarded as follows:

Two (2) copies to: Secretary-Treasurer
Northern Village of _____
P.O. Box _____
_____(Québec) JOM _____
Fax: (819) _____

One (1) copy to: By mail: or By email :
Land Use Planner landuse@krg.ca
Kativik Regional Government
P.O. Box 9
Kuuujuaq (Québec) JOM 1C0
Fax: (819) 964-2961

I hereby give my consent to allow all authorized persons the right to enter the above land and/or buildings for inspection purposes with respect to this application only.

Signature of applicant: _____

Signature of witness: _____ Date: _____
(Application form completed)

RECOMMENDATIONS: _____

Signature of secretary-treasurer _____ Date _____