

File: 7.	8.3.112
PID Nbr:	009-428-364
Roll Nbr:	

## **DEVELOPMENT & DEVELOPMENT VARIANCE PERMIT APPLICATION**

l/We	Krahn Engineering Ltd						
	0-34077 Gladys Ave		(Name of Appli	cant)			
		(Mai	ling Address)				
apply	for the following perm	nit(s) to manage deve	elopment on the	e property specified	below.		
1.	Permit Type						
	Developmen	nt Permit	\$700				
	Developmen	nt Variance Permit	\$350				
2.	Subject Property						
	Civic Address 65	66 Kuldo Blvd				, Kitimat, B.C., V8C	1 V
	Legal Description	Lot 2 Block 267	Plan 7283				
		Lot	Block		ict Lot	RP	
	Zone R4-A			Property Area	.16891725(ha)		ha
	Official Community	y Plan Designation	<u>1</u>	Neighbourhood			
3.	Existing Use						
	Describe existing u	use and developmen nily	t.				
	2 story motel, 1	2 foot additional le	ngth added to	each room, both	floors in the ba	ck.	
4.	Proposed Use						
	Describe proposed use and development (attach extra pages if necessary).						
	To be opened again as a motel, 12 feet of addition building added at the rear.						
		ect start date and con as started, complet	•				
5.	General Commer	nts					
		ments in support of a	• •	t increase in dema	and and will be I	ess of an eye sore	once
	once the addition	on is completed.					

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1.	Attachmen	15

8.

documents in			e you provide some or all of the following nts which are checked as "required". Other		
Required	Sketch plan of site showing the parcel(s) to be re-designated (by zoning amendment), existing building, access, services and scale. Measurements should be in metres. Preferred size is 28 cm x 43 cm (11" x 17").				
Required	Technical information	and reports listed below.			
	(Manual Control of Con	A CONTRACTOR OF THE PARTY OF TH			
			-		
Require	d Copy of (1) State of Copies are available to application date.	f Title Certificate, or (2) Certificate from the Land Title Office, and s	te of Indefeasible Title, for subject property. hould be dated no more than thirty days prior		
Declarations	5				
a. Prop	erty Owner				
	re the applicant(s) is/are e registered owner(s) or		er(s), the following statement must be signed		
This	application is made with	my/our full knowledge and conse	nt. 0-20/4/(2)		
Phil	lip Cheung		2020/May /26.		
410	Nam -233 West 1st S Nortl	e(s) n Vancouver BC V7M 1B3	Date		
	Mailing Address (i	nd Postal Code) phill@iag-enterprises.com	Authorized Signature(6)		
***************************************	Phone	Email	Fax		
b. Appli	cant				
	ur knowledge, true and		upport of this application are, to the best of		
1	Alborthat Signal		may 27 2020		
778	-3345-7275	jeffb@krahn.com	Date N/A		
	Phone	Email	Fax		
FOR OFFICE	USE:				
Ye	s No	27 May 2020	CB		
	on Details Attached?	Fee Paid (Date)	Initials of Official		
Ye		Yes No	_		
Building	Permit Required?	Bldg Permit Application Rcvd?	•		
Circulation:	Building Engineering	Fire Planning			
Department Co	omment Required by:	10 June 2020			
,	- 4	(Date)			